No. <b>C 158047</b>		Due no later than Dec 31, 2008		2. Re	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		No. 1989	NATE THORESON 1132 E POLSTON POST FALLS ID 83854  3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  THORESON PHYSICAL THERAPY, P.A.  NATE THORESON  1132 E POLSTON  POST FALLS ID 83854  USA  Dess Addresses of President, Secretary, and Directors. Treasurer (		PC				
NO FILING FEE IF RECEIVED BY DUE DATE  4. Cornorations: Enter Names and Busine				asurer (ontion				
Office Held	Name	icas / idai casca oi	Street or PO Address	City	-	State	Country	Postal Code
PRESIDENT	SIDENT NATE THORE		1132 E POLSTON AVE	POS	T FALLS	ID	USA	83854
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 158047		Signature: Nate Thoreson			Date: 11/05/2008			
		Name (type or print): Nate Thoreson			Title: President			
Processed 11/05/200	08	* Electronically	provided signatures are accepted as origin	nal signatures	S.			