

## INSTRUCTIONS ON REVERSE SIDE

No. 80646	Idaho Corporation Annual Report Form	ISSUED: 07-11-1984 2. Registered Agent and Office <b>NOT A P.O. BOX</b>
Return To  <b>Secretary of State Room 203, Statehouse Boise, ID 83720</b>  * FIRST NOTICE * NO FEE REQUIRED	Due No Later Than November 1, 1987	J. WALTER SINCLAIR 126 2ND AVE. N., PO BOX 336
	1. Mailing Address: <b>CLEARWATER CARE CENTER, INC. J.M. HUTCHINGS 162 BLAKE STREET NORTH  TWIN FALLS ID 83301</b>	TWIN FALLS ID 83303  3. Incorporated Under The Laws of ID NO: 80646

## 4. Names and Addresses of Officers and Directors

MUST BE PRINTED OR TYPED

Name	Street or P.O. Address	City	State	Zip
President: JAMES M. HUTCHINGS	3254 WOODRIDGE DR	TWIN FALLS	ID	83301
Secretary: DIANE S. HUTCHINGS	"	"	"	"
Directors: JAMES M. HUTCHINGS	"	"	"	"

## 5. Nature of Business

 INTERMEDIATE CARE  
 FACILITIES/MENTALLY RETARDED

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature

Name (Typed and Printed)

Date

Title

 JAMES M. HUTCHINGS  
 JAMES M. HUTCHINGS

 7-8-93  
 PRESIDENT