

No. W 746

Due no later than December 31, 2008
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

CENTER FOR PHYSICAL REHABILITATION,
JULIE A ELLIS
714 N COLLEGE RD
TWIN FALLS, ID 83301JULIE A ELLIS
714 N COLLEGE RD STE B
TWIN FALLS, ID 83301NO FILING FEE IF
RECEIVED BY DUE DATE3. New Registered Agent Signature

4.

Limited Liability Companies: Enter Names and Addresses of Members.

Office heldNameStreet or P.O. AddressCityStateZip

Member	Julie Ellis	3228 Highlawn, Twin Falls, ID 83301
Member	Charles T Wagner	3228 Meadowridge Cir, Twin Falls, ID 83301
Member	Dennis Gillette	832 Alturas Dr, Twin Falls, ID 83301
Member	Tracy Becerra	433 Crestview Dr, Twin Falls, ID 83301
Member	Seth Phillips	640 Garnet, Twin Falls, ID 83301

5. Organized Under the Laws of:

IDAHO
W 746

6.

Signature

Name (Typed or Printed)

Date

Title

Julie A Ellis

Julie A. Ellis

Oct 10, 2008

Member