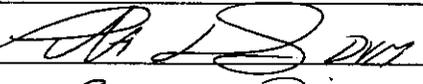


No. W 505	Due no later than Sep 30, 2001		2. Registered Agent and Office NO PO BOX																								
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	Annual Report Form 1. Mailing Address - Correct in this box, if applicable HERD HEALTH P.L.L.C. ROBERT DEY 14260 SAND HOLLOW RD CALDWELL, ID 83607		ROBERT DEY 14260 SAND HOLLOW RD CALDWELL, ID 83607																								
NO FILING FEE IF RECEIVED BY DUE DATE			3. <u>New</u> Registered Agent Signature																								
4. Limited Liability Companies: Enter Names and Addresses of Managers.																											
<table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>MANAGING MEMBER</td> <td>ROBERT DEY</td> <td>14260 SAND HOLLOW RD</td> <td>CALDWELL,</td> <td>ID</td> <td>83607</td> </tr> <tr> <td>MEMBER</td> <td>CARL WOODSQUAN</td> <td>4023 MEADOW AVE</td> <td>CALDWELL,</td> <td>ID</td> <td>83605</td> </tr> <tr> <td>MEMBER</td> <td>PAUL PROHRSMA</td> <td>RR. 1, BOX 2009</td> <td>HOXTEDALE,</td> <td>ID</td> <td>83628</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	MANAGING MEMBER	ROBERT DEY	14260 SAND HOLLOW RD	CALDWELL,	ID	83607	MEMBER	CARL WOODSQUAN	4023 MEADOW AVE	CALDWELL,	ID	83605	MEMBER	PAUL PROHRSMA	RR. 1, BOX 2009	HOXTEDALE,	ID	83628
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5. Organized Under the Laws of: IDAHO W 505	6. Signature  Date <u>7/11/01</u> Name (Typed or Printed) <u>ROBERT DEY</u> Title <u>MANAGING MEMBER</u>																										

Issued 07/02/2001

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