No. W 1108	Due no later than May 31, 2002 Annual Report Form  1. Mailing Address - Correct in this box, if applicable SOUTHERN IDAHO THERAPY SERVICES, P.  PO BOX 565  JEROME, ID 83338		2. Registered Agent and Office NO PO BOX SCOTT R BLOXHAM 1224 8TH ST STE A RUPERT, ID 83350 3. New Registered Agent Signature	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON				
PO BOX 83720 BOISE, ID 83720-0080				
NO FILING FEE IF RECEIVED BY DUE DATE				
4. Limited Liability Compar	nies: Enter Names and Addresses of M	lembers.		
Office held Name	Street or P.O. Address	<u>City</u>	State	<u>Zip</u>
Partner Scott R. F	Bloxham 1224 8th St Ste A	Rupert	ID	83350
Partner Jerry L. A	aiken 128 5th Ave W.	Jerome	ID	83338
<ol><li>Organized Under the Laws of:</li></ol>	6.	Vorchan P.T.	Date3/	/11 /02
IDAHO			Date7	
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W 1108	Name Printed Scott R. E	OTOXHOM		1350