No. C 187618	Due	Due no later than Jun 30, 2016		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Ad REHAB SYSTEM 427 N CURTIS	Annual Report Form 1. Mailing Address: Correct in this box if needed. REHAB SYSTEMS BOISE, INC. 427 N CURTIS RD BOISE ID 83706		PEGGY D PERKINS 427 N CURTIS ROAD BOISE ID 83706			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and	Business Addresses of P	resident, Secretary, and Directors. Tre	3. <u>New</u> Registe	ered Agent Si	ignature:*		
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
	HEW J PERKINS FIN DALE PERKINS	427 N CURTIS ROAD 427 N CURTIS ROAD	BOISE BOISE	ID ID	USA USA	83706 83706	
5. Organized Under the Laws of:	6. Annual Report	must be signed.*					
по	Signature: We	Signature: Wendy Hosac		Date: 05/11/2016			
C 187618	Name (type or	Name (type or print): Wendy Hosac		Title: Chief Operating Officer			
Processed 05/11/2016	* Electronically provided signatures are accepted as original signatures.						