

No. W 45080

Due no later than December 31, 2007
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

LEWIS-CLARK CARE CENTER, L.L.C.
RONALD V STOFFER
PO BOX 165
LEWISTON, ID 83501

RONALD V STOFFER
1633 10TH AVE
LEWISTON, ID 83501

NO FILING FEE IF
RECEIVED BY DUE DATE

3. New Registered Agent Signature

N/A

4. Limited Liability Companies: Enter Names and Addresses of Managers.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
SOLE PROPRIETOR	RONALD V. STOFFER	P.O. BOX 165	LEWISTON	IDAHO	83501-0165

5. Organized Under the Laws of:
IDAHO
W 45080

6.

Signature

Ronald V. Stoffer

Date

10-9-07

Name

(Typed or Printed)

RONALD V. STOFFER

Title

SOLE PROPRIETOR

Issued 10/01/2007

Do Not Tape or Staple

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