

No. C104244	Annual Report Form Due No Later Than November 30, 1997		2. Registered Agent and Office NOT A P.O. BOX																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct NORTHWEST THERAPY SERVICES, WAYNE A THOMAS PO BOX 227		WAYNE A THOMAS 3040 JUNIPER DR AMERICAN FAL ID 83211																		
* FIRST NOTICE *		AMERICAN FALLS ID 83211	3. Organized Under the Laws of: CA C104244																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)																					
<table style="width: 100%; border: none;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Wayne A. Thomas</td> <td>P.O. Box 227</td> <td>American Falls, ID</td> <td>83211</td> <td></td> </tr> <tr> <td>Secretary</td> <td>DeEtte R. Thomas</td> <td>"</td> <td>"</td> <td>"</td> <td>"</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>	President	Wayne A. Thomas	P.O. Box 227	American Falls, ID	83211		Secretary	DeEtte R. Thomas	"	"	"	"
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ISSUED: 07-04-1997

↓ DO NOT TAPE OR STAPLE ↓

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