

No. C103534

Annual Report Form

1995

Due No Later Than November 30,

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  
  
\* FIRST NOTICE \*

1. Mailing Address - Please Correct, If Not Correct

LIFE THERAPY, INC.

5530 GOLDENROD DR

RENO

NV 89511

JULIE WHITEHEAD  
1220 MONTANA

GOODING ID 83330

3. Organized Under the Laws of:

NV

C103534

4. Corporations: Enter Names and Addresses of **President, Secretary and Directors**  
Limited Liability Companies: Enter Names and Addresses of  Managers or  Members (check one)

Office held	Name	Street or P.O. Address	City	State	Zip
President	Phil Rountree	5530 Goldenrod Dr.	Reno	NV	89511

5. NATURE OF BUSINESS  
  
CONTRACT THERAPIST

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.  
Signature *Phil Rountree* Date \_\_\_\_\_  
Name (Typed or Printed) \_\_\_\_\_ Title \_\_\_\_\_

ISSUED: 07-06-1995

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