

No. C 176133	Due no later than Dec 31, 2010 Annual Report Form	2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. PEAK PHYSICAL THERAPY STAFFING, INC. DONALD M LIDSTROM 930 N. COLE ROAD BOISE ID 83704	JIM P JOHNSON 206 VILLAGE LANE PL BOISE ID 83702 3. <u>New</u> Registered Agent Signature:*				
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
DIRECTOR	JIM P JOHNSON	206 VILLAGE LANE PL	BOISE	ID	USA	83702
5. Organized Under the Laws of: ID C 176133	6. Annual Report must be signed.* Signature: Jim Johnson Name (type or print): Jim Johnson		Date: 10/08/2010 Title: Director			
Processed 10/08/2010		* Electronically provided signatures are accepted as original signatures.				