		2. Registered Agent and Offi	ce NO PO BOX	
	than Apr 30, 2003			
No. W 1064	Due no later than Apr 30, 2003 Annual Report Form 1. Mailing Address - Correct in this box, it applies	BRET V OGATA 8555 W HACKAMORE	BRET V OGATA 8555 W HACKAMORE DR STE 100	
Return to:	Mailing Address - Correct II one MYERS AND STAUFFER LC	BOISE, ID 83709 1665		
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	4123 SW GAGE CENTER DR STE 200	3. New Registered Agent S	Signature	
NC EEE IF	TOPEKA, KS 66604			
RECEIVED BY DUE DATE	nies: Enter Names and Addresses of Mana Street or P.O. Address	agers. <u>City</u> <u>State</u>	<u>Zip</u>	
Office held Name	Care Center Dr.	Topeka KS	66604	
ember Kevin C Lon	Ste 200 8555 North River Rd,	Indianapolis IN	46240	
Member Keenan S Bu	Ste 360	Kansas City MO	64112 46240	
Member James D Ers	~~ 6555 ROTON	Indianapolis IN	66604	
TEMOC 2	Sie Suo Cago Center Dr,			
Principal Kathryn M	Ste 200	o Indianapolis IN	25/03	
principal Jared B. F. 5. Organized Under the Laws of	Signature A Classym		ipal	
KANSAS W 1064	Name Printed) Kathryn M Wa	aue	7	
lanuad 02/03/200	Do Not Tape or Sta	pie		