

No. <b>W 22611</b>		<b>Due no later than Feb 28, 2007</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  PALOUSE HEALTH PROPERTIES, L.L.C. AMY CLARK 2300 W A ST MOSCOW ID 83843		AMY CLARK 2300 W A ST MOSCOW ID 83843			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	KARA BESST	2300 W A ST	MOSCOW	ID	USA	83843	
MANAGER	JEFF MARTIN	2300 W A ST	MOSCOW	ID	USA	83843	
MANAGER	JOHN MORRISON	2300 W A ST	MOSCOW	ID	USA	83843	
MANAGER	DAVID SHUPE	2300 W A ST	MOSCOW	ID	USA	83843	
MANAGER	CHRIS REISENAUER	2300 W A ST	MOSCOW	ID	USA	83843	
MANAGER	STEVE PENNINGTON	2300 W A ST	MOSCOW	ID	USA	83843	
5. Organized Under the Laws of:  <b>IDAHO</b> <b>W 22611</b>		6. Annual Report must be signed.*  Signature: AMY CLARK Name (type or print): AMY CLARK					
		Date: 12/15/2006 Title: OFFICE MANAGER					
Processed 12/15/2006		* Electronically provided signatures are accepted as original signatures.					