

INSTRUCTIONS ON REVERSE SIDE

ISSUED: 06-30-1990

No. 66223		Idaho Corporation Annual Report Form	
Return To Secretary of State Room 203, Statehouse Boise, ID 83720		Due No Later Than November 1, 1990	
		1. Mailing Address — Please Correct	
		EXCEL HEALTH CARE MANAGEMENT JON T. FRYE 3608 MEADOW LANE	
NO FEE REQUIRED		NAMPA	ID 83687

2. Registered Agent and Office

JON T. FRYE
702 SOUTH SEVENTH AVENUE

CALDWELL ID 83605

3. Incorporated Under The Laws
of ^{ID}

NO: 066223

4. Names and Addresses of Officers and Directors

NameStreet or P.O. AddressCityStateZipPresident:
Secretary:
Directors:Leon C. Feller 3608 Meadow Ln Nampa Id 83687
" " "

5. Nature of Business

HEALTH CARE SERVICES

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

Name (Type or
Print)

Leon C. Feller

Date

7-9-90

Title

President