

No. C 156625

Due no later than September 30, 2008
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

FAMILY & CHILDREN'S REHABILITATIVE
622 COLLEGE AVE
ST MARIES, ID 83861BRYAN GIMMESON
55366 S HWY 97
ST MARIES, ID 83861NO FILING FEE IF
RECEIVED BY DUE DATE3. New Registered Agent Signature

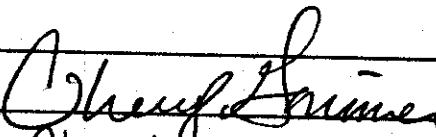
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	Bryan Gimmeson	622 College Ave	St. Maries	Id	83861
Secretary	Cheryl Gimmeson	622 College Ave	St. Maries	Id	83861

5. Organized Under the Laws of:
IDAHO
C 156625

6.

Signature



Date 7/16/08

Name (Typed or Printed)

Cheryl Gimmeson

Title

Secretary

Issued 07/01/2008

Do Not Tape or Staple

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