

<b>No. C 116531</b> Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>Due no later than Sep 30, 2000 Annual Report Form</b> <div style="background-color: black; color: white; padding: 2px; text-align: center;">1. Mailing Address - Correct in this box, if applicable</div> HEALING CENTER, INC. (THE) PAMELA L. CHIVERS 2503 W. STATE ST.  BOISE, ID 83702	<b>2. Registered Agent and Office NO PO BOX</b> <div style="border: 1px solid black; padding: 2px;"> <del>PAMELA L. CHIVERS</del> <b>CAROLE A. Conley</b>          2503 W. STATE ST.          1/2          BOISE, ID 83702       </div> <div style="border: 1px solid black; padding: 2px;"> <b>3. New Registered Agent Signature</b>  </div>
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**4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.**

Office held.	Name	Street or P.O. Address	City	State	Zip
Pres/DIR.	Ralph Fullmer	3311 N. Winsome	Boise	ID	83702
VPres/DIR.	Bry Turner	2503 W. State	Boise	ID	83702
Sec/DIR.	Carole Conley	2503 1/2 W. State	Boise	ID	83702
Treas/DIR.	Jenefer Hughes	1212 N. 10th	Boise	ID	83702

<b>5. Organized Under the Laws of:</b>  IDAHO C 116531	<b>6.</b> Signature  Date <u>10/27/00</u> Name (Typed or Printed) <u>CAROLE A. Conley</u> Title: <u>Secretary</u>
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Issued 10/26/2000

**Do Not Tape or Staple**

Fold, seal and mail this portion.

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