No.	W 8055	Due no later than February 28, 2001 Annual Report Form	
700 W PO BO BOISE NO FIL RECEI	ETARY OF STATE /EST JEFFERSON DX 83720 E, ID 83720-0080 LING FEE IF IVED BY DUE DATE	1. Mailing Address - Correct in this box. if applicable EVERGREEN HEALTHCARE MANAGEMENT, L. 4601 NE 77TH AVE STE 300 VANCOUVER, WA 98662	BOISE, ID 83701  3. New Registered Agent Signature
l. (	Limited Liability Compa	nies: Enter Names and Addresses of Manager	
Offi	ce held Name	Street or P.O. Address	City State Zlp
Manag	er Dale L. Pa	atterson 4601 NE 77th Ave., #300	Vancouver WA 98662
5 Organ	nized Under the Laws of: WASHINGTO	Signature Latter	120 Date 2/23/07
o. Oiga	W 8055	Name Printed Dale L. Patterso	n Title <u>Manager</u>