			Due no later than Dec 31, 2000 Annual Report Form			2. Registered Agent and Office NO PO BOX		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address - Correct in this box, if applicable GREEN ACRES CARE CENTER, INC. PO BOX 2255 WENATCHEE, WA 98807			BARBARA NOBLE 5901 ELLENS FERRY WAY BOISE, ID 83704 3. New Registered Agent Signature			
nter Nam			esident, Secretar	y and D	irectors. State	Zip		
nomas H	. Dye	1225 Orchard	Wenato	hee	WA	98801		
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HINGTO		Olgridadic			Date	9/23/00 sident		
	DATE Enter Name nomas H nomas H nomas H nomas H	PO BO WENA DATE Enter Names and ne nomas H. Dye	PO BOX 2255 WENATCHEE, WA 98807 Enter Names and Business Addresses of Presence Street or P.O. Address nomas H. Dye 1225 Orchard Name (Typed or Thomas H. Dye Printed)	PO BOX 2255 WENATCHEE, WA 98807 Enter Names and Business Addresses of President, Secretary Street or P.O. Address City nomas H. Dye 1225 Orchard Wenato Signature Momas H. Dye One of the property of the p	BOISE 3. New F DATE Ther Names and Business Addresses of President, Secretary and Date Street or P.O. Address City nomas H. Dye 1225 Orchard Wenatchee nomas H. Dye 1225 Orchard Wenatchee	PO BOX 2255 WENATCHEE, WA 98807 Enter Names and Business Addresses of President, Secretary and Directors. Street or P.O. Address City State Homas H. Dye 1225 Orchard Wenatchee WA HINGTON HINGTON HOMAS H. Dye Title: Pre		

Issued 10/02/2000

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