

No. 880627	Idaho Corporation Annual Report Form Due No Later Than November 1, 1988	2. Registered Agent and Office																													
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 SEC. OF STATE 88 JUL 15 AM 9 15		1. Mailing Address - Please Correct 086827	LAWRENCE OHMAN 2641 SEAPORT DRIVE 1626 177A ST LEWISTON, IDAHO 83501																												
4. Names and Addresses of Officers and Directors		3. Incorporated Under The Laws of STATE OF IDAHO																													
<table border="1"> <thead> <tr> <th data-bbox="34 404 693 436"></th> <th data-bbox="693 404 1123 436"><u>Name</u></th> <th data-bbox="1123 404 1354 436"><u>Street or P.O. Address</u></th> <th data-bbox="1354 404 1453 436"><u>City</u></th> <th data-bbox="1453 404 1536 436"><u>State</u></th> <th data-bbox="1536 404 1620 436"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td data-bbox="34 436 693 478">President:</td> <td data-bbox="693 436 1123 478">Larry C. Ohman</td> <td data-bbox="1123 436 1354 478">2641 Seaport Dr.</td> <td data-bbox="1354 436 1453 478">Lewiston</td> <td data-bbox="1453 436 1536 478">ID</td> <td data-bbox="1536 436 1620 478">83501</td> </tr> <tr> <td data-bbox="34 478 693 521">Secretary:</td> <td data-bbox="693 478 1123 521">Margaret E. Ohman</td> <td data-bbox="1123 478 1354 521">2641 Seaport Dr.</td> <td data-bbox="1354 478 1453 521">Lewiston</td> <td data-bbox="1453 478 1536 521">ID</td> <td data-bbox="1536 478 1620 521">83501</td> </tr> <tr> <td data-bbox="34 521 693 563" rowspan="2">Directors:</td> <td data-bbox="693 521 1123 563">Larry C. Ohman</td> <td data-bbox="1123 521 1354 563">2641 Seaport Dr.</td> <td data-bbox="1354 521 1453 563">Lewiston</td> <td data-bbox="1453 521 1536 563">ID</td> <td data-bbox="1536 521 1620 563">83501</td> </tr> <tr> <td data-bbox="693 563 1123 606">Margaret E. Ohman</td> <td data-bbox="1123 563 1354 606">2641 Seaport Dr.</td> <td data-bbox="1354 563 1453 606">Lewiston</td> <td data-bbox="1453 563 1536 606">ID</td> <td data-bbox="1536 563 1620 606">83501</td> </tr> </tbody> </table>				<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	Larry C. Ohman	2641 Seaport Dr.	Lewiston	ID	83501	Secretary:	Margaret E. Ohman	2641 Seaport Dr.	Lewiston	ID	83501	Directors:	Larry C. Ohman	2641 Seaport Dr.	Lewiston	ID	83501	Margaret E. Ohman	2641 Seaport Dr.	Lewiston	ID	83501
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5. Nature of Business <i>Outpatient Physical Therapy</i>	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 <u><i>Larry C. Ohman</i></u> President Name (Typed or Printed) <u>Larry C. Ohman</u> Date <u>7-12-88</u> Title <u>President</u>																														

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