INSTRUCTIONS ON REVERSE SIDE

No. 73833

Return To

Secretary of State
Room 203, Statehouse
Boise, ID 83720

★ FIRST NOTICE ★
NO FEE REQUIRED

Idaho Corporation Annual Report Form

Due No Later Than November 1,

1 Name and Address

HAND REHABILITATION CENTER, INC
JUDY DAVIS
BOX 31704

PARMA ID 83646

2. Registered Agent and Office NOT A P.O. BOX

JUDY DAVIS
537 W. BANNOCK, STE. 215

BOISE ID 83702

3. Incorporated Under The Laws of ID
NO: 73833

4. Names and Addresses of Officers and Directors **MUST BE PRINTED OR TYPED**

	Name	Street or P.O. Address	City	State	Zip
President:	Judy Davis	PO Box 31704	Phoenix	Az	85046
Secretary:	Judy Davis	PO Box 31704	Phoenix	Az	85046
Directors:	Judy Davis	PO Box 31704	Phoenix	Az	85046

5. Nature of Business

Occupational Therapy Services

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 Judy Davis Date 7/24/93
Name (Typed or Printed) Title President