

No. 91017

Idaho Corporation Annual Report Form

ISSUED 10-01-1992
2. Registered Agent and Office NOT A P.O. BOX

Return To

Secretary of State
Room 203, Statehouse
Boise, ID 83720

Due No Later Than November 1, 1992

1 Mailing Address - Please Correct, If Not Correct

RAPTOR REHABILITATION CENTER, I
PATRICIA SMITH
P.O. BOX 583

PATRICIA SMITH
3 MILES EAST OF GLENN'S FERRY
ROSEVEAR RD
GLENN'S FERRY ID 83623 0000

** FINAL NOTICE **
NO FEE REQUIRED

GLENN'S FERRY ID 83623 0000

3. Incorporated Under The Laws

of ID

NO: 91017

4. Names and Addresses of Officers and Directors

	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President:	ROD REES	P.O. Box 834	Glenns Ferry	Id	83623
Secretary:	PATRICIA SMITH	P.O. Box 163	Glenns Ferry	Id	83623
Directors:	MARTA GREEN	P.O. Box 834	Glenns Ferry	Id	83623

5. Nature of Business

Rehabilitation of education

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

(Typed or Printed Name)

Patricia A. Smith
Patricia A. Smith

Date

Title

10-26-92
Sec