No. C 85198	Annual Report Form 1997 Due No Later Than November 30,	2. Registered Agent a	and Office NOT A P.O. BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE Limited Liability Companie	1. Mailing Address - Please Correct, if Not Correct ALPHA HEALTH SERVICES, INC. JAMES C STONE EXAMINATION 1301 E. 3rd Post Falls, ID 83854 COSTINGEN AND EXAMINATION 25 8444 The Business Addresses of President, Secretary and Directors Enter Names and Addresses of Managers or Members	110 WALLA COEUR D A 3. Organized Under to	ACE AVĘ ALEN ID 83814
Office held Na President/Director Secretary VicePresident/ Director Director	AMES STONE 1301 E. 3rd Pos ACK LASLO 1301 E. 3rd Pos ILLIAM DOWNING 6181 Hwy 2 San	City It Falls	State Zip ID 83854 ID 83854 ID 83864 ID 83814
Care Centers ISSUED: 07-0	Signature Name (Typed or Printed) DO NOT TAPE OR STAPLE	INIV	11-7-97 CEO/Pres.