

Annual Report Form
Due No Later Than November 30,

2. Registered Agent 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 *

1. Mailing Address - Please Correct, If Not Correct

YELLOWSTONE CARE CENTER, INC
ROBERT M DECKER
1564 COMMERCIAL ST SE

SALEM

OR 97302

ROBERT M. DECKER
2460 YELLOWSTONE HWY,
IDAHO FALLS ID 83402

3. Organized Under the Laws of:

OR

C 60640

4. Corporations: Enter Names and Business Addresses of **President, Secretary and Directors**
Limited Liability Companies: Enter Names and Addresses of ☐ **Managers** or ☐ **Members** (check one)

Office held

Name

Street or P.O. Address

City

State

Zip

PRESIDENT ROBERT M. DECKER 1560 COMMERCIAL ST SE SALEM OREGON 97302

SECRETARY ROBERT M. DECKER 1560 COMMERCIAL ST SE SALEM, OREGON 97302

5. Signature of New Registered Agent

6.

Signature

Date

8-24-98

Name (Typed or Printed)

ROBERT M. DECKER

Title

PRESIDENT

ISSUED: 07-03-1998

DO NOT TAPE OR STAPLE

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