No. <b>W 36487</b>		Due no later than Feb 28, 2011			2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  PARK CENTER ASSISTED LIVING LLC  MARK A PHELAN  4345 S VARIAN AVE  BOISE ID 83709			MARK PHELAN 1212 LONGMONT AVE BOISE ID 83706  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar			least one Member or Manager.		or <u>item</u> regio	eer eu 7 igenie en	gnacarer	
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MEMBER	MARK A PHELAN		1836 S CURTIS		BOISE	ID	USA	83705
5. Organized Under the Laws of:  ID  W 36487		6. Annual Report must be signed.* Signature: Mark Phelan Name (type or print): Mark Phelan			Date: 01/20/2011 Title: Member			
Processed 01/20/2011 * Electronically provided signatures are accepted as original signatures.								