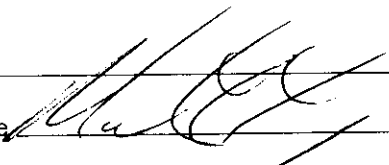
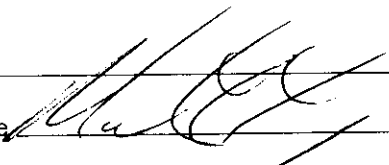
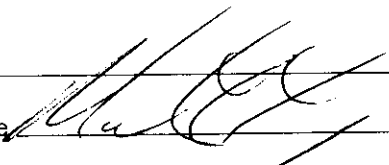


No. C 104199 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Due no later than Dec 31, 2000 Annual Report Form 1. Mailing Address - Correct in this box, if applicable LONG HEALTH CENTER, INC. MARK E LONG 45 EAST MAIN ST. ANTHONY, ID 83445	2. Registered Agent and Office NO PO BOX MARK E LONG 45 EAST MAIN ST. ANTHONY, ID 83445 3. <u>New</u> Registered Agent Signature
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4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Pres.	Mark E. Long	45 E Main	St. Anthony	ID	83445
Vice Pres.	Verl P. Long	45 E Main	St. Anthony	ID	83445
Sec.	Laurie A. Long	128 W. 4th N.	St. Anthony	ID	83445
Tres.	Audrey M. Ling	280 N 7th E.	St. Anthony	ID	83445

5. Organized Under the Laws of: IDAHO C 104199	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature  Name (Typed or Printed) Mark E. Long </td> <td style="width: 40%;"> Date 10/15-00 Title: Pres XXXX </td> </tr> </table>	Signature  Name (Typed or Printed) Mark E. Long	Date 10/15-00 Title: Pres XXXX
Signature  Name (Typed or Printed) Mark E. Long	Date 10/15-00 Title: Pres XXXX		

Issued 10/02/2000

Do Not Tape or Staple

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