	then tul 31 2003	2. Registered Agent and Office NO PO BOX
W 4E	Due no later than Jul 31, 2003	JEEEDEN STIEGLITZ
No. W 15	Annual Report Form	OCCO THOUCHARY TANK
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1 Mailing Address Correct in this box, if applicable INTERMOUNTAIN COMMUNITY CARE, L.L.C JEFFREY STIEGLITZ 2725 CHANNING WAY IDAHO FALLS, ID 83404	2725 CHANNING WAY IDAHO FALLS, ID 83404 3. New Registered Agent Signature
NO FILING FEE IF		
RECEIVED BY DUE DATE 4. Limited Liability Compar	nies: Enter Names and Addresses of Managers. Street or P.O. Address	City State Zip
Office held Name MEMBER CHANNING M		FALLS IDAHO 83404
MEMBER SOUTHEAST	IDAHO FAMILY PRACTICE, LLC 2775 CHANNING WAY IDAHO	FALLS IDAHO 83404
5. Organized Under the Laws of IDAHO	6. Signature Name Printed Signature JEFFREY B. STIEG	Date 5.17.053 MEMBER OF CHANN Title MEDICAL LEASING
l l	Name Printed)	38
W 15	Name Printed Do Not Tape or Staple	38