No. C 113979	Due no later than Mar 31, 2002		2. Registered Agent and Office 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 RIVER CITY MEDICAL CAMPUS ASSO **********************************	ATTN 2115	EMPIRE AIRLINES ATTN LARRY TUCKER 2115 GOVERNMENT WAY COEUR D'ALENE, ID 83814	
NO FILING FEE IF RECEIVED BY DUE DATE	COEUR D'ALENE, ID 83814	3. <u>New</u>	Registered Agent Signature	
4. Corporations: Enter Nam	ies and Business Addresses of Presid	lent, Secretary and I	Directors.	
Office held Name Manager LaepyTucke EmpireArr	Street or P.O. Address 2115 Government Wines	<u>City</u> By Coened Alen	State Zip \$3814	
Member Allen 600	dall W.103 Hayden	Post Falls	IP 83824	
Member Teresa 6	oodall W.103 Hayden	Post Falls	D 83824	
5. Organized Under the Laws of: IDAHO C 113979	6. Signature Name (Typed or ARRY To	Icker	Date 3/14/02	
Issued 01/02/2002	Do Not Tape or Sta	ple	4640	