No. <b>W 66081</b> Return to:		Due no later than Aug 31, 2012 Annual Report Form			Registered Agent and Address (NO PO BOX)     VIVIAN A SWANSEN			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. TRINITY ASSISTED LIVING LLC VIVIAN A SWANSEN PO BOX 521 KOOTENAI ID 83840		100 HUMBIR KOOTENAI	100 HUMBIRD ST KOOTENAI ID 83840  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compar	nies: Enter Nai	mes and Addresse	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	ANAGER VIVIAN A SWANSEN		PO BOX 521	KOOTENAI	ID	USA	83840	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 66081		Signature: Viv		Date: 09/19/2012				
		Name (type or	print): Vivian A Swansen		Title: Administrator			
Processed 09/19/2012	Processed 09/19/2012 * Electronically provided signatures are accepted as original signatures.							