No. <b>C 155958</b>		Due no later than Aug 31, 2008		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		VALLEY VIST	VALLEY VISTA CARE CORPORATION			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.		820 ELM ST				
		ST. MARIES EXTENDED HOUSING CORPORATION LESLIE HIEBERT CEO VALLEY VISTA CARE CORPORATION 820 ELM ST ST MARIES ID 83861		ION	ST MARIES ID 83861  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA			3			
4. Corporations: Enter	r Names and Busin	ess Addresses o	f President, Secretary, and Directors. Treas	surer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	BILL COWIN		1022 PARK DRIVE	ST MARIES	ID	USA	83861	
SECRETARY	SECRETARY JEAN DOHRMAN		59510 S. HWY 97	ST MARIES	ID	USA	83861	
DIRECTOR JOHN THOMSON		SON	1118 S. 4TH STREET	ST MARIES	ID	USA	83861	
DIRECTOR KAY F. MILLER		_ER	1 J LANE	ST MARIES	ID	USA	83861	
DIRECTOR	IRECTOR GARY YOUNG		WEST 85 SHADY LANE	WORLEY	ID	USA	83876	
DIRECTOR			2301 CROMWELL DRIVE	ST MARIES	ID	USA	83861	
DIRECTOR	WAYNE FOX	WORTH	352 AHRS LOOP	ST MARIES	ID	USA	83861	
5. Organized Under the Laws of: 6.		6. Annual Report must be signed.*						
ID C 155958		Signature: Leslie Hiebert		Date: 08/13	Date: 08/13/2008			
		Name (type or print): Leslie Hiebert		Title: Chief	Title: Chief Executive Officer			
Processed 08/13/2008	8	* Electronically	provided signatures are accepted as origina	al signatures.				