

No. <b>W 7981</b>	<b>Due no later than February 28, 2005</b> <b>Annual Report Form</b>	2. Registered Agent and Office <b>NO PO BOX</b>
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		1. Mailing Address - Correct in this box, if applicable  ASPEN CENTER, REHABILITATION & COUN KIM SIX PO BOX 990 <del>TETON VALLEY HOSPITAL CLINIC</del> DRIGGS, ID 83422

4. Limited Liability Companies: Enter Names and Addresses of Members.

Office held	Name	Street or P.O. Address	City	State	Zip
Manager	Kim M Six	164 N. Mt Washburn	Driggs	ID	83422

5. Organized Under the Laws of:  IDAHO W 7981	6. Signature <u><i>Kim M Six</i></u> Date <u>12-12-04</u> Name (Typed or Printed) <u>Kim M Six</u> Title <u>Pres/Manager</u>
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