

No. W 32467		Due no later than Aug 31, 2013 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. JOSHUA TREE PHYSICAL THERAPY, P.L.L.C. KEVIN SGROI 8475 GOVERNMENT WAY HAYDEN ID 83835		KEVIN J SGROI PT PA 8475 GOVERNMENT WAY HAYDEN ID 83835			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name KEVIN J SGROI	Street or PO Address 8475 GOVERNMENT WAY		City HAYDEN	State ID	Country USA	Postal Code 83835
5. Organized Under the Laws of: ID W 32467		6. Annual Report must be signed.* Signature: Kevin J Sgroi Name (type or print): Kevin J Sgroi Date: 06/25/2013 Title: Manager					
Processed 06/25/2013 * Electronically provided signatures are accepted as original signatures.							