

No. W 20115	Due no later than July 31, 2007		2. Registered Agent and Office NO PO BOX																																										
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Annual Report Form		JUDSON B MONTGOMERY																																										
	1. Mailing Address - Correct in this box, if applicable		601 W BANNOCK																																										
	SNAKE RIVER REAL ESTATE LLC 601 W BANNOCK BOISE, ID 83702		BOISE, ID 83702																																										
			3. <u>New</u> Registered Agent Signature																																										
4. Limited Liability Companies: Enter Names and Addresses of Members.																																													
<table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td></td> <td>Saint Alphonsus Diversified Care, Inc.,</td> <td>1055 N. Curtis,</td> <td>Boise,</td> <td>ID</td> <td>83706</td> </tr> <tr> <td></td> <td>Jon Wagnild, M.D.,</td> <td>5610 West Gage, Suite A,</td> <td>Boise,</td> <td>ID</td> <td>83706</td> </tr> <tr> <td></td> <td>Nagraj Narasimhan, M.D.,</td> <td>1840 Canyon Crest Dr.,</td> <td>Twin Falls,</td> <td>ID</td> <td>83301</td> </tr> <tr> <td></td> <td>Michael Adcox, M.D.,</td> <td>5610 West Gage, Suite A,</td> <td>Boise,</td> <td>ID</td> <td>83706</td> </tr> <tr> <td></td> <td>Micheal Mallea, M.D.,</td> <td>5610 West Gage, Suite A,</td> <td>Boise,</td> <td>ID</td> <td>83706</td> </tr> <tr> <td></td> <td>Robert L. Davidson, M.D.,</td> <td>5610 West Gage, Suite A,</td> <td>Boise,</td> <td>ID</td> <td>83706</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>		Saint Alphonsus Diversified Care, Inc.,	1055 N. Curtis,	Boise,	ID	83706		Jon Wagnild, M.D.,	5610 West Gage, Suite A,	Boise,	ID	83706		Nagraj Narasimhan, M.D.,	1840 Canyon Crest Dr.,	Twin Falls,	ID	83301		Michael Adcox, M.D.,	5610 West Gage, Suite A,	Boise,	ID	83706		Micheal Mallea, M.D.,	5610 West Gage, Suite A,	Boise,	ID	83706		Robert L. Davidson, M.D.,	5610 West Gage, Suite A,	Boise,	ID	83706
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5. Organized Under the Laws of: IDAHO W 20115	6. Signature  Date <u>5-18-07</u> Judson B. Montgomery Authorized Signatory Name (Typed or Printed) _____ Title _____																																												

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