| No. W 24030 | | Due no later than May 31, 2011 Annual Report Form 1. Mailing Address: Correct in this box if needed. AHC OGDEN LLC CINDY M STICE 215 N WHITLEY STE 1 FRUITLAND ID 83619 | | 2. Registered Agent and Address (NO PO BOX) DAVID W NATTRESS 215 N WHITLEY STE 1 FRUITLAND ID 83619 3. New Registered Agent Signature:* | | | |
|---|-------------------------------------|---|---|---|-------|---------|-------------|
| No. W 24030 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | |
| | | mes and Addresses o | f at least one Member or Manager. | | | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code |
| MEMBER | K BRETT NA | TTRESS | 215 N WHITLEY DRIVE SUITE 1 | FRUITLAND | ID | USA | 83619 |
| MEMBER | ADVANCED HEALTH CARE CORPORATION | | 215 N WHITLEY STE 1 | FRUITLAND | ID | USA | 83619 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| ID W 24030 | | Signature: K Brett Nattress | | Date: 03/30/2011 | | | |
| | | Name (type or pr | Title: President | | | | |
| Processed 03/30/2011 | | * Electronically provi | ded signatures are accepted as original s | signatures. | | | |