

No. W 44092		Due no later than Oct 31, 2008 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. RELIEF WORKERS RESPIRATORY THERAPY, P.L.L.C. PAUL W DAUGHARTY 110 E WALLACE AVE COEUR D ALENE ID 83814		PAUL W DAUGHARTY 110 E WALLACE AVE COEUR D ALENE ID 83814			
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 MEMBER	Name JIM MORRIS	Street or PO Address POBOX1239		City COEUR D ALENE	State ID	Country USA	Postal Code 83816-1239
5. Organized Under the Laws of: ID W 44092		6. Annual Report must be signed.* Signature: Paul W. Daugharty Name (type or print): Paul W. Daugharty Date: 08/14/2008 Title: Registered Agent					
Processed 08/14/2008 * Electronically provided signatures are accepted as original signatures.							