0.00054	Due no later than Nov 30, 2002	2. Registered Agent and Office NO PO BOX
No. C 96651	Annual Report Form	C T CORPORATION SYSTEM
Return to:	1 Mailing Address - Correct in this box, if applicable	300 N 6TH STREET
SECRETARY STATE	CAREINSTITUTE	
700 WEST JEFF RSON PO BOX 83720	THE PLANT PLANT STE 200	BOISE, ID 83702
BOISE, ID 83720-0080	200 S HOOVER BLVD STE 200	3. New Registered Agent Signature
	TAMPA, FL 33609	3. New Registered Agont Orginal of
NO FILING FEE IF	1744174,12 00000	
RECEIVED BY DUE DATE	ames and Business Addresses of President, Secre	tary and Directors.
4. Corporations: Enter N		City State Zip
Office held Name		Nty
Hease	See ATTAChed Listor	
	1 0 - (2
5. Organized Under the Laws of	6.	Telle Date 10-8-02 1ch Title Secretary
CALIFORN	IA Signature	Son cotaria
C 96651	Name Printed or Cathy J. Will	Title Secretify
		1839
Issued 09/03/2002	Do Not Tape or Staple	1000

CAREINSTITUTE

<u>Officers</u>		Office	Address	Term Expires Director
Johnson	Mary Jane	President, Chief Executive Officer, & Director	200 South Hoover Blvd., Suite 200, Tampa, FL 33609	Annual Meeting X
Landis Welch	Robert Cathv	Chairman, Chief Financial Officer, and Treasurer Secretary and VP of Finance	200 South Hoover Blvd., Suite 200, Tampa, FL 33609 200 South Hoover Blvd., Suite 200, Tampa, FL 33609	Annual Meeting Chairman Annual Meeting