

No. C 98030		Due no later than Mar 31, 2002 Annual Report Form		2. Registered Agent and Office 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 applicable SNAKE RIVER HEALTH MANAGEMENT, INC. PO BOX 1786 IDAHO FALLS, ID 83403		DAVID ANDERSEN 363 TYRA IDAHO FALLS, ID 83401	
NO FILING FEE IF RECEIVED BY DUE DATE				3. New Registered Agent Signature	
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.					
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	David L. Andersen	PO Box 1786 Idaho Falls, ID			83403
Secretary	Susan A. Andersen	PO Box 1786 Idaho Falls, ID			83403
Director	David L. Andersen	PO Box 1786 Idaho Falls, ID			83403
5. Organized Under the Laws of:					
IDAHO C 98030		6. Signature Name <small>(Typed or Printed)</small>		Date 2/26/02 Title President	
Issued 01/02/2002					
Do Not Tape or Staple					