No. <b>W 44322</b>		Due no later than Nov 30, 2016			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		MICHELLE Y MORI				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed.  PINE BROOK ASSISTED LIVING CENTER OF IDAHO FALLS, LLC MICHELLE Y MORI 1140 SCIENCE CENTER DR IDAHO FALLS ID 83402		599 EVANS AVE IDAHO FALLS ID 83402  3. New Registered Agent Signature:*				
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.								
Office Held Nar			Street or PO Address	<b>5</b>	City	State	Country	Postal Code
MANAGER MIC	CHELLE Y	MORI	599 EVANS AVE		IDAHO FALLS	ID		83402
5. Organized Under the Laws	of:	6. Annual Report must be signed.*						
ID W 44322		Signature: MICHELLE MORI			Date: 11/30/2016			
		Name (type or print): MICHELLE MORI			Title: Manager			
Processed 11/30/2016 * Electronically provided signatures are accepted as original signatures.								