

No. W 32467		Due no later than Aug 31, 2006		2. Registered Agent and Address (NO PO BOX)	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. JOSHUA TREE PHYSICAL THERAPY, P.L.L.C. CHARLENE COWAN 8475 GOVERNMENT WAY HAYDEN ID 83835		KEVIN J SGROI PT PA 8475 GOVERNMENT WAY HAYDEN ID 83835	
				3. <u>New</u> Registered Agent Signature: *	
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country Postal Code
MANAGER	KEVIN J SGROI	8475 GOVERNMENT WAY	HAYDEN	ID	83835
5. Organized Under the Laws of: IDAHO W 32467		6. Annual Report must be signed.* Signature: Kevin J. Sgroi Name (type or print): Kevin J. Sgroi Date: 06/08/2006 Title: Owner			
Processed 06/08/2006		* Electronically provided signatures are accepted as original signatures.			