No. W 6016	Due no later than Apr 30, 2014	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	Annual Report Form 1. Mailing Address: Correct in this box if needed. EVERGREEN IDAHO HEALTHCARE SANDPOINT, L.L.C. LAURA HOLGATE 4601 NE 77TH AVE STE 300 VANCOUVER WA 98662	C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705 USA 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4 Limited Liability Companies: Ent	r Names and Addresses of at least one Member or Manager.				
Office Held Name	Street or PO Address	City	State	Country	Postal Code
MANAGER EMPRE	HEALTHCARE MANAGMENT, L 4601 NE 77TH AVENUE SUITE 300	VANCOUVER	WA	USA	98662
5. Organized Under the Laws of:	6. Annual Report must be signed.*				
WA	Signature: Laura Holgate	Date: 04/30/2014			
W 6016	Name (type or print): Laura Holgate	Title: Authorized Employee			
Processed 04/30/2014	* Electronically provided signatures are accepted as original signatures.				