

<b>No. W 20902</b>  Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>Due no later than September 30, 2003</b> <b>Annual Report Form</b> 1. Mailing Address - Correct in this box if applicable WHISPERING PINES ASSISTED LIVING LL  520 WILLARD  POCA TELLO, ID 83201	2. Registered Agent and Office <b>NO PO BOX</b>  SHELLY BARTHLOME 4714 NAVAJO ST  POCA TELLO, ID 83204  3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Managers.  <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Manager</td> <td>SHELLY Barthlome</td> <td>4714 Navajo St.</td> <td>Pocatello</td> <td>ID</td> <td>83204</td> </tr> </tbody> </table>			<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Manager	SHELLY Barthlome	4714 Navajo St.	Pocatello	ID	83204
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>									
Manager	SHELLY Barthlome	4714 Navajo St.	Pocatello	ID	83204									
5. Organized Under the Laws of:  <div style="text-align: center;">IDAHO W 20902</div>	6. Signature <u>Shelly Barthlome</u> Date <u>7-10-03</u>  Name <small>(Typed or Printed)</small> <u>SHELLY BARTHLOME</u> Title <u>Manager</u>													