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940 N. Eagle Rd.
Eagle ID 83616

No. C 91297		Due no later than January 31, 2009 Annual Report Form		2. Registered Agent and Office NO PO BOX													
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address - Correct in this box, if applicable TRANSITIONAL LIVING CENTER CORPORAT XXXXXXXXXXXXXXX JOE SANCHEZ XXXXXXXXXXXXXXX 558 WEST 20TH STREET IDAHO FALLS, ID 83402 XXXXXXXXXXXXXXX 940 N. Eagle Rd Eagle ID 83616		XXXXXXXXXXXXXXX XXXXXXXXXXXXXXX XXXXXXXXXXXXXXX IDAHO FALLS, ID 83402													
NO FILING FEE IF RECEIVED BY DUE DATE				3. New Registered Agent Signature Adesha - m													
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1"><thead><tr><th>Office held</th><th>Name</th><th>Street or P.O. Address</th><th>City</th><th>State</th><th>Zip</th></tr></thead><tbody><tr><td colspan="6">PLEASE SEE ATTACHED</td></tr></tbody></table>						Office held	Name	Street or P.O. Address	City	State	Zip	PLEASE SEE ATTACHED					
Office held	Name	Street or P.O. Address	City	State	Zip												
PLEASE SEE ATTACHED																	
5. Organized Under the Laws of: IDAHO C 91297		6. Signature  Name (Typed or Printed) JOE SANCHEZ Title Reg manager		Date 11-17-08													

Issued 11/05/2008

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T.L.C. Board of Directors

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