

No. 84974 Return To Secretary of State Room 203, Statehouse Boise, ID 83720 RECEIVED NO REC. REQUIRED 89 OCT 17 AM 9 28	Idaho Corporation Annual Report Form <i>Due No Later Than November 1, 1989</i> 1. Mailing Address — Please Correct 84974 WEST MAGIC CARE CENTER, INC. A. KEITH HOLLOWAY ROUTE 11, BOX 288 2465 OVERLAND ROAD, SUITE D-202 MIDDLETON ID 83644- BOISE 83705	2. Registered Agent and Office DONALD W. LOJEK 305 WEST FORT STREET BOISE ID 83702 3. Incorporated Under The Laws of IDAHO NO: 84974																														
4. Name and Address of Officers and Directors																																
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;"></th> <th style="width: 35%; text-align: center;"><u>Name</u></th> <th style="width: 30%; text-align: center;"><u>Street or P.O. Address</u></th> <th style="width: 10%; text-align: center;"><u>City</u></th> <th style="width: 10%; text-align: center;"><u>State</u></th> <th style="width: 10%; text-align: center;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>A. Keith Holloway</td> <td>27119 Middleton Road</td> <td>Middleton</td> <td>ID</td> <td>83644</td> </tr> <tr> <td>Secretary:</td> <td>Delta B. Holloway</td> <td>27119 Middleton Road</td> <td>Middleton</td> <td>ID</td> <td>83644</td> </tr> <tr> <td>Directors:</td> <td>A. Keith Holloway</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>Delta B. Holloway</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	A. Keith Holloway	27119 Middleton Road	Middleton	ID	83644	Secretary:	Delta B. Holloway	27119 Middleton Road	Middleton	ID	83644	Directors:	A. Keith Holloway						Delta B. Holloway				
	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>																											
President:	A. Keith Holloway	27119 Middleton Road	Middleton	ID	83644																											
Secretary:	Delta B. Holloway	27119 Middleton Road	Middleton	ID	83644																											
Directors:	A. Keith Holloway																															
	Delta B. Holloway																															
5. Nature of Business NURSING FACILITY 89 OCT 20 AM 9 10	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature <i>A. Keith Holloway</i> Name (Typed or Printed) A. KEITH HOLLOWAY </td> <td style="width: 40%;"> Date 10-16-89 Title PRESIDENT </td> </tr> </table>		Signature <i>A. Keith Holloway</i> Name (Typed or Printed) A. KEITH HOLLOWAY	Date 10-16-89 Title PRESIDENT																												
Signature <i>A. Keith Holloway</i> Name (Typed or Printed) A. KEITH HOLLOWAY	Date 10-16-89 Title PRESIDENT																															