

No. C 89901

Due no later than July 31, 2008
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

SAND CREEK MEDICAL SALES AND RENTAL
GARY D. RENCH
P.O. BOX 974
SANDPOINT, ID 83864GARY D. RENCH
306 1/2 NORTH FIRST AVENUE
SANDPOINT, ID 83864NO FILING FEE IF
RECEIVED BY DUE DATE3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

Office held	Name	Street or P.O. Address	City	State	Zip
President	Gary Rench	P.O. Box 974	Sandpoint	ID	83864
Vice President	Tammi Rench	P.O. Box 974	Sandpoint	ID	83864
Sec/Treasurer	Tammi Rench	P.O. Box 974	Sandpoint	ID	83864
Director	Gary Rench	P.O. Box 974	Sandpoint	ID	83864
Director	Tammi Rench	P.O. Box 974	Sandpoint	ID	83864

5. Organized Under the Laws of:

IDAHO
C 89901

6.

Signature

Date 5/22/08

Name (Typed or Printed)

Gary Rench

Title President

Issued 05/02/2008

Do Not Tape or Staple

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