

No. **W 900**

**Due no later than Feb 28, 2002
Annual Report Form**

2. Registered Agent and Office **NO PO BOX**

Return to:
SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

RIVER CITY PHYSICAL THERAPY, P.L.L.
DENNIS M. DAVIS
608 NORTHWEST BLVD.
STE. 401
COEUR D'ALENE, ID 83814

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3. New Registered Agent Signature

**NO FILING FEE IF
RECEIVED BY DUE DATE**

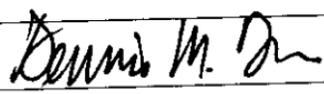
4. Limited Liability Companies: Enter Names and Addresses of Members.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Member	Eric Verhaeghe	1100 E. Polston	Post Falls	Idaho	83854
Member	David Hillman	1100 E. Polston	Post Falls	Idaho	83854

5. Organized Under the Laws of:

IDAHO
W 900

6.

Signature 

Date 12-11-01

Name (Typed or Printed)

Dennis M. Davis

Title

Attorney and
Registered Agent