

No. C 86214	Due no later than Mar 31, 2002		2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Annual Report Form		J ROBIN KINSEY 133 WEST AVE A JEROME, ID 83338
	1. Mailing Address - Correct in this box, if applicable LOSTARK HEALTHCARE, INC. J ROBIN KINSEY PO BOX 583 133 WEST AVE A JEROME, ID 83338		
3. <u>New</u> Registered Agent Signature			
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.			
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>
<u>State</u>	<u>Zip</u>		
pres.	J Robin Kinsey	Box 583	jerome
5. Organized Under the Laws of: IDAHO C 86214		6. Signature <u>Ann Kinsey</u> Date <u>1-10-02</u> Name <small>(Typed or Printed)</small> <u>ANN KINSEY</u> Title <u>Sec.</u>	