

No. C 133852	Due no later than May 31, 2003 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable PARKE VIEW CARE AND REHABILITATION 2303 PARKE AVE BURLEY, ID 83318		JOYCE HEINZE 830 14TH #7 HEYBURN, ID 83336 3. <u>New</u> Registered Agent Signature													
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="0" style="width: 100%;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Secretary</td> <td>Candice Wells</td> <td>840 27</td> <td>Burley</td> <td>Id.</td> <td>83318</td> </tr> </tbody> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Secretary	Candice Wells	840 27	Burley	Id.	83318
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
Secretary	Candice Wells	840 27	Burley	Id.	83318											
5. Organized Under the Laws of: IDAHO C 133852		6. Signature <u>Joyce Heinze</u> Date <u>6-11-03</u> Name (Typed or Printed) <u>Joyce Heinze</u> Title <u>Volunteer Coordinator</u>														