

No. C 156625

Due no later than September 30, 2006
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

FAMILY & CHILDREN'S REHABILITATIVE
622 COLLEGE AVE
ST MARIES, ID 83861BRYAN GIMMESON
55366 S HWY 97
ST MARIES, ID 83861NO FILING FEE IF
RECEIVED BY DUE DATE3. New Registered Agent Signature

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

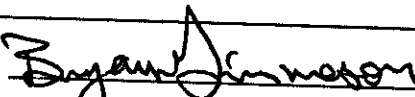
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
PRESIDENT	BRYAN GIMMESON	622 COLLEGE AVE	ST MARIES	ID	83861
SECRETARY	CHERYL GIMMESON	622 COLLEGE AVE	ST MARIES	ID	83861

5. Organized Under the Laws of:

IDAHO
C 156625

6.

Signature



Date

7-10-06

Name (Typed or Printed)

Bryan Gimmeson

Title

Owner/Administrator

Issued 07/03/2006

Do Not Tape or Staple

200609005995