INSTRUCTIONS ON REVERSE SIDE

No. 83710

Idaho Corporation Annual Report Form

Due No Later Than November 1, 1991

Return To

Secretary of State
Room 203, Statehouse
Boise, ID 83720

** FINAL NOTICE **
NO FEE REQUIRED

1. Mailing Address - *Please Correct If Not Correct*

TWIN FALLS CARE CENTER, INC.
BRENT BROCKSOME
~~277 N. 6TH ST.~~ ~~PARK PLACE~~
960 Broadway, Suite 260
~~BOISE~~ Boise ~~ID 83702 0090~~ ID 83706

2. Registered Agent and Office NOT A P.O. BOX

CHRISTOPHER J. BEESON
277 NORTH 6TH STREET
~~BOISE~~ ID 83702

3. Incorporated Under The Laws of ID

~~NO: 083710~~

4. Names and Addresses of Officers and Directors

	Name	Street or P.O. Address	City	State	Zip
President:	Brent Brocksom	960 Broadway Suite 260	Boise	Idaho	83706
Secretary:	"	"	"	"	"
Directors:	Pat Brocksom				

5. Nature of Business

Health Care

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature Brent Brocksome Date 10-20-91

Name (Typed or Printed) Brent Brocksome Title President