

No. **C 53569**

Due no later than June 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

POCATELLO PHYSICAL THERAPY CLINIC,
DAN DESFOSSSES
560 MEMORIAL DR
POCATELLO, ID 83201DAN DESFOSSSES
2181 SATTERFIELD
POCATELLO, ID 832013. New Registered Agent Signature**NO FILING FEE IF
RECEIVED BY DUE DATE**

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

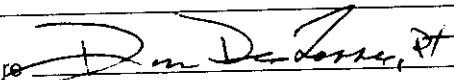
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	DAN DESFOSSSES	2181 SATTERFIELD	POCATELLO, ID.	ID.	83201
V.P. - Secretary	COLIN R. BENEDETTI	927 Sogewood	POCATELLO	ID.	83201

5. Organized Under the Laws of:

IDAHO
C 53569

6.

Signature



Date

4-11-06