

No. **C 127706**

Due no later than Feb 28, 2001

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

JOHNSON'S ALL STAR PHYSICAL THERAPY
LYNN R JOHNSON
~~240 S COLE RD~~ 5075 N. LAWSONIA PLACELYNN R JOHNSON
5075 N LAWSONIA PLACE

BOISE, ID 83713

**NO FILING FEE IF
RECEIVED BY DUE DATE**BOISE, ID ~~83709~~ BOISE, ID 837133. 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	LYNN R. JOHNSON	5075 N. LAWSONIA PL	BOISE	IDAHO	83713
SECRETARY	DIANE JOHNSON	5075 N. LAWSONIA PL	BOISE	IDAHO	83713
DIRECTORS:					
	LYNN R. JOHNSON	5075 N. LAWSONIA PL	BOISE	IDAHO	83713
	DIANE JOHNSON	5075 N. LAWSONIA PL	BOISE	IDAHO	83713

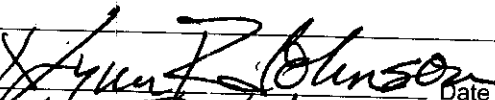
5. Organized Under the Laws of:

IDAHO
C 127706

6.

Signature

Name (Typed or Printed)


Lynn R. Johnson

Date

Title:

X Type

2/14/01
Owner

Issued 12/05/2000

Do Not Tape or Staple

3218