

No. W 91127		Due no later than Mar 31, 2012		2. Registered Agent and Address (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		Annual Report Form		JAMES KING 4846 WIND RIVER DR IDAHO FALLS ID 83401			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		RENAISSANCE REHAB LLC JAMES A KING PO BOX 365 IONA ID 83427 USA					
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER	SHERRIE M KING	4846 WINDRIVER DR	IDAHO FALLS	ID	USA	83401	
MEMBER	JAMES A KING	4846 WINDRIVER DR	IDAHO FALLS	ID	USA	83401	
5. Organized Under the Laws of: ID W 91127		6. Annual Report must be signed.* Signature: James A. King Name (type or print): James A. King		Date: 01/09/2012 Title: Owner			
Processed 01/09/2012		* Electronically provided signatures are accepted as original signatures.					