

INSTRUCTIONS ON REVERSE SIDE

No. 74084	Idaho Corporation Annual Report Form Due No Later Than November 1, 1991	2. Registered Agent and Office NOT A P.O. BOX HARMON E. HOLVERSON 501 WEST IDAHO BOULEVARD EMMETT ID 83617
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 ** FINAL NOTICE ** NO FEE REQUIRED	1. Mailing Address: - Please Correct, If Not Correct - HOLLY HILLS CARE CENTER, INC. HARMON E. HOLVERSON 501 WEST IDAHO BLVD., BOX 37 EMMETT ID 83617 0000	3. Incorporated Under The Laws of ID NO: 074084

4. Names and Addresses of Officers and Directors

	Name	Street or P.O. Address	City	State	Zip
President:	HARMON E. HOLVERSON	P.O. BOX 37	EMMETT	IDAHO	83617
Secretary:	YVONNE HOLVERSON	P.O. BOX 37	EMMETT	IDAHO	83617
Directors:	KEITH HOLLOWAY	2465 OVERLAND SUITE D	BOISE	IDAHO	83617
	DELTA HOLLOWAY	2465 OVERLAND SUITE D	BOISE	IDAHO	83617

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

Name (Printed)

YVONNE HOLVERSON

Date

Title

11-1-91

SECRETARY