

No. 75939	<b>Idaho Corporation Annual Report Form</b>		2. Registered Agent and Office																									
Return To  <b>Secretary of State</b> <b>Room 203, Statehouse</b> <b>Boise, ID 83720</b>  NO FEE REQUIRED	Due No Later Than November 1, 1990		CHARLENE HUMPHERYS 490 EAST 2ND NORTH  MOUNTAIN HOME ID 83647 153																									
	1. Mailing Address — Please Correct																											
	CEDAR CREST RETIREMENT CENT CHARLENE HUMPHERYS 1200 EAST 8TH SOUTH  MOUNTAIN HOME ID 83647		3. Incorporated Under The Laws of ID  NO: 075939																									
4. Names and Addresses of Officers and Directors <table border="1"> <thead> <tr> <th></th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>Charlene Humpherys</td> <td>P.O. Box 388</td> <td>Mountain Home, Id</td> <td></td> <td>83647</td> </tr> <tr> <td>Secretary:</td> <td>Clarice Miner</td> <td>6418 Ustick Rd</td> <td>Boise, Id</td> <td></td> <td>83704</td> </tr> <tr> <td>Directors:</td> <td colspan="5">Same</td> </tr> </tbody> </table>						Name	Street or P.O. Address	City	State	Zip	President:	Charlene Humpherys	P.O. Box 388	Mountain Home, Id		83647	Secretary:	Clarice Miner	6418 Ustick Rd	Boise, Id		83704	Directors:	Same				
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Secretary:	Clarice Miner	6418 Ustick Rd	Boise, Id		83704																							
Directors:	Same																											
5. Nature of Business  Retirement Ctr.		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table border="1"> <tr> <td>Signature</td> <td>Clarice Miner</td> <td>Date</td> <td>10-10-90</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>Clarice Miner</td> <td>Title</td> <td>Sec</td> </tr> </table>			Signature	Clarice Miner	Date	10-10-90	Name (Typed or Printed)	Clarice Miner	Title	Sec																
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