No. C 105096	Due no later than February 29, 2004	2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	Annual Report Form 1. Mailing Address Correct in this box if applicable ST. ELIZABETH CONVALESCENT HOSPITAL CAROL A KELLER 1955 SPRINGBROOK LN	CAROL A KELLER 1955 SPRINGBROOK LN BOISE, ID 83706
NO FILING FEE IF RECEIVED BY DUE DATE	BOISE, ID 83706	3. New Registered Agent Signature
 Corporations: Enter Na 	mes and Business Addresses of President, Secreta	ary and Directors.
President CAROLA Secretary CAROLA	Street or P.O. Address Cit KELLER 1955 Spring brook La Bridge Brook La. 1. KELLER 1955 Spring brook La.	bise ID f370L Beise 2D f3706
5. Organized Under the Laws of: CALIFORNIA C 105096	6. Signature 2. (C. /) (C. Name Printed) CAROLA KELL	Date 12-7-03 EK Title President