

No. C 87064		Due no later than Jul 31, 2009		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 1. Mailing Address: Correct in this box if needed. EAST END PROVIDERS, INC. MARTI KINCAID BOX 4 KIMBERLY ID 83341		MARTI KINCAID 3849-B N 3700 E HANSON ID 83334		
				3. <u>New</u> Registered Agent Signature:*		
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
DIRECTOR	CECILLE GRIFFITH	215 MAIN NORTH	KIMBERLY	ID	USA	83341
TREASURER	ANN ANDERSON	423 WASHINGTON	KIMBERLY	ID	USA	83341
SECRETARY	ANN ANDERSON	423 WASHINGTON	KIMBERLY	ID	USA	83341
PRESIDENT	MARTI KINCAID	3849-B NORTH 3700 EAST	HANSEN	ID	USA	83334
5. Organized Under the Laws of: ID C 87064		6. Annual Report must be signed.* Signature: Marti Kincaid Name (type or print): Marti Kincaid				
		Date: 06/10/2009 Title: President				
Processed 06/10/2009		* Electronically provided signatures are accepted as original signatures.				