

INSTRUCTIONS ON REVERSE SIDE

No. 89236	Idaho Corporation Annual Report Form Due No Later Than November 1, 1993		Issued: 07-61-1021 2. Registered Agent and Office NOT A P.O. BOX																									
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 * FIRST NOTICE * NO FEE REQUIRED	1. Mailing Address: IDaho ASSISTED LIVING, INC.		CHARLES L. WINDER 877 W. ST. MAIN, SUITE 610 BOISE ID 83702																									
	CHARLES L. WINDER 877 W MAIN, SUITE 610 BOISE ID 83702		3. Incorporated Under The Laws of ID NO: 89236																									
4. Names and Addresses of Officers and Directors MUST BE PRINTED OR TYPED																												
<table border="1"> <thead> <tr> <th></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>Charles L. Winder</td> <td>P.O. Box 7387</td> <td>Boise</td> <td>ID</td> <td>83707</td> </tr> <tr> <td>Secretary:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	Charles L. Winder	P.O. Box 7387	Boise	ID	83707	Secretary:						Directors:					
	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>																							
President:	Charles L. Winder	P.O. Box 7387	Boise	ID	83707																							
Secretary:																												
Directors:																												
5. Nature of Business Assisted Living for the elderly		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>Date 7/13/93</td> </tr> <tr> <td>Name (Printed) Charles L. Winder</td> <td>Title President</td> </tr> </table>			Signature 	Date 7/13/93	Name (Printed) Charles L. Winder	Title President																				
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