

No. C 116232		Due no later than Aug 31, 2005		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. PREMIER THERAPY SERVICES, INC MATTHEW STEVENS 329 S WOODRUFF IDAHO FALLS ID 83404 0000		MATTHEW STEVENS 1830 HEATHER LN IDAHO FALLS ID 83406 0000		
				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
PRESIDENT	MATTHEW STEVENS	1831 S FOOTHILL	IDAHO FALLS	ID	USA	83401
SECRETARY	CATHERINE STEVENS	1831 S FOOTHILL	IDAHO FALLS	ID	USA	83401
DIRECTOR	MATTHEW STEVENS	1831 S FOOTHILL	IDAHO FALLS	ID	USA	83401
DIRECTOR	CATHERINE STEVENS	1831 S FOOTHILL	IDAHO FALLS	ID	USA	83401
5. Organized Under the Laws of: IDAHO C 116232		6. Annual Report must be signed.* Signature: CATHERINE STEVENS Name (type or print): CATHERINE STEVENS Date: 06/07/2005 Title: SECRETARY				
Processed 06/07/2005		* Electronically provided signatures are accepted as original signatures.				