

No. W 61411		Due no later than Apr 30, 2008		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. IN TOUCH REHABILITATION SERVICES, PLLC C/O WITHERSPOON, KELLEY, ET AL. 608 NW BLVD STE 401 COEUR D'ALENE ID 83815		WITHERSPOON KELLEY DAVENPORT 608 NW BLVD STE 401 COEUR D'ALENE ID 83815	
				3. <u>New</u> Registered Agent Signature:*	
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country Postal Code
MEMBER	BRAD SHARPLES-FAUCHER	NORTH 3015 SAND TRAP WAY	POST FALLS	ID	USA 83854
5. Organized Under the Laws of: ID W 61411		6. Annual Report must be signed.* Signature: Robert J. Caldwell Name (type or print): Robert J. Caldwell Date: 04/09/2008 Title: Attorney/Registered Agent			
Processed 04/09/2008		* Electronically provided signatures are accepted as original signatures.			