

No. C 78371	Annual Report Form 1999 Due No Later Than November 30,		2. Registered Agent and Office NOT A P.O. BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct WORKER REHABILITATION ASSOCI DR. DAVID D. ROBINSON 4265 CORRIENTE PLACE BOULDER CO 80301		DAVID D. ROBINSON 475 MAIN STREET BOISE ID 83702
* FIRST NOTICE *			3. Organized Under the Laws of: ID C 78371

4. Corporations: Enter Names and Business Addresses of **President, Secretary and Directors**
 Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)

Office held	Name	Street or P.O. Address	City	State	Zip
PRESIDENT	DAVID D. ROBINSON	4265 CORRIENTE PL.	BOULDER	CO	80301
SECRETARY	SHELLA D. ROBINSON	" "	"	"	"

5. Signature of New Registered Agent	6.
	Signature <u>David D. Robinson</u> Date <u>7/26/99</u> Name (Typed or Printed) <u>DAVID D. ROBINSON</u> Title <u>PRESIDENT</u>

ISSUED: 07-03-1999

370