

No. C 86214

Due no later than March 31, 2005
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

LOSTARK HEALTHCARE, INC.
J ROBIN KINSEY
PO BOX ~~368~~ 64
~~JEROME, ID 83338~~

J ROBIN KINSEY
108 W AVE B
JEROME, ID 83338

NO FILING FEE IF
RECEIVED BY DUE DATE

MACRAY, ID. 83257

3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

Office held	Name	Street or P.O. Address	City	State	Zip
PRES	J Robin Kinsey	102464	MACRAY	ID	83257

5. Organized Under the Laws of:

IDAHO
C 86214

6.

Signature

Date

1-17-05

Name (Typed or Printed)

J ROBIN KINSEY

Title

PRES.

Issued 01/03/2005

Do Not Tape or Staple

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