

No. C100569	Annual Report Form 1996 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 SQUAW PEAK CARE CENTER, INC. A. KEITH HOLLOWAY 1475 N COLE RD		A. KEITH HOLLOWAY 1475 N COLE RD BOISE ID 83704
	* FIRST NOTICE * BOISE ID 83704		3. Organized Under the Laws of: ID C100569

4. Corporations: Enter Names and 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	A. Keith Holloway	1475 N. Cole Road	Boise	ID	83704
Secretary	Barry L. Goff	565 W Myrtle, Ste 240	Boise	ID	83702
Directors	A. Keith Holloway	1475 N. Cole Road	Boise	ID	83704
	Barry Goff	565 W. Myrtle, Ste 240	Boise	ID	83702
	Richard J. Kirwan	1475 N. Cole Road	Boise	ID	83704

5. NATURE OF BUSINESS NURSING FACILITY	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <u>A. Keith Holloway</u> Date <u>8-8-96</u> Name (Typed or Printed) <u>A. Keith Holloway</u> Title <u>President</u>
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ISSUED: 07-06-1996

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