

ISSUED: 02-30-1995

No. 576	Idaho Limited Liability Company Annual Report Form		2. Registered Agent and Office NOT A P.O. BOX																					
Return To <b>REINSTATEMENT</b> Secretary of State 700 W Jefferson P.O. Box 83720 Boise, ID 83720-0080 ** FINAL NOTICE OF STATE OF IDAHO NO FEE REQUIRED	Due No Later Than November 30, 1995 1. Mailing Address - Please Correct if Not Correct HEALTHCARE SERVICES, L.L.C. J KENT MUELLER 151 N THIRD AVE 2043 E. Center POCA TELLO ID 83201		J KENT MUELLER 151 N THIRD AVE POCA TELLO ID 83201 3. Organized Under The Laws of ID NO: 576																					
4. Names and Addresses of <input checked="" type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) MUST BE PRINTED OR TYPED <table border="1"> <thead> <tr> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>J. Kent Mueller</td> <td>2043 E. Center</td> <td>Pocatello</td> <td>Id</td> <td>83201</td> </tr> <tr> <td><del>Mary Brooks Mueller</del></td> <td><del>2043 E. Center</del></td> <td><del>Pocatello</del></td> <td><del>Id.</del></td> <td><del>83201</del></td> </tr> <tr> <td>Frank Covington</td> <td>P.O. Box 5107</td> <td>Jackson</td> <td>MS.</td> <td>39216</td> </tr> </tbody> </table>					Name	Street or P.O. Address	City	State	Zip	J. Kent Mueller	2043 E. Center	Pocatello	Id	83201	<del>Mary Brooks Mueller</del>	<del>2043 E. Center</del>	<del>Pocatello</del>	<del>Id.</del>	<del>83201</del>	Frank Covington	P.O. Box 5107	Jackson	MS.	39216
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5. Signature of the Current Registered Agent (if changed in block 2)		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>R.C. Budge</u> Date <u>12/8/95</u> Name <u>R.C. Budge</u> <u>Authorized Attorney, Racine, Olan, Nye</u> <u>Cooper &amp; Budge, P.O. Box 1391 Pocatello, Id. 83204</u>																						

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 SECRETARY OF STATE  
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