

**STATE OF UTAH
DEPARTMENT OF COMMERCE
DIVISION OF CORPORATIONS AND COMMERCIAL CODE**



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NON-PROFIT CORPORATION ANNUAL REPORT

The following information is on file in this office. Pursuant to Utah Law, all non-profit corporations must file their annual reports and corrections within the month of their anniversary date. Failure to do so will result in Delinquency, Suspension, then Revocation or Involuntary Dissolution of the corporate charter.

<p><small>CORPORATE NAME, REGISTERED AGENT, REGISTERED OFFICE, CITY, STATE & ZIP</small></p> <p>CORPORATION # 122542 N/A</p> <p>D 09/26/86</p> <p>1. LIFE-LINE, INC.</p> <p>2. ROBERT B. HANSEN</p> <p>3. 838 18TH AVENUE</p> <p>4. SALT LAKE CITY UT 84103</p>	<p align="center">MAKE ALL CORRECTIONS IN THIS COLUMN</p> <p><small>(Print New Agent Name)</small> _____ <small>NEW AGENT MUST SIGN</small></p> <hr/> <p><small>NEW REGISTERED STREET ADDRESS REQUIRED</small></p> <p align="center">UTAH</p> <p><small>(New City) REGISTERED AGENT MUST BE IN UTAH (ZIP)</small></p>
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WHEN CHANGING THE REGISTERED AGENT, THE NEW AGENT MUST SIGN BOTH AGENT & ADDRESS CHANGES REQUIRE AN AUTHORIZED SIGNATURE ON LINE 14

<p>5. INCORPORATED IN THE STATE AND UNDER THE LAWS OF: UTAH</p>	
<p>6. ADDRESS OF THE PRINCIPAL OFFICE IN THE HOME STATE.</p> <p>462 BEARCAT DR</p> <p>SALT LAKE CITY UT 84115</p>	<p><small>(Street Address)</small> _____ <small>(City)</small></p> <p>_____</p> <p><small>(State or Country)</small> _____ <small>(ZIP)</small></p>

<p>OFFICERS</p> <p>7. PRESIDENT</p> <p>ADDRESS _____</p> <p>CITY, STATE & ZIP _____</p> <p>8. VICE PRESIDENT</p> <p>ADDRESS _____</p> <p>CITY, STATE & ZIP _____</p> <p>9. SECRETARY</p> <p>ADDRESS _____</p> <p>CITY, STATE & ZIP _____</p> <p>10. TREASURER STEVE GUNN</p> <p>ADDRESS 4515 S 2995 W</p> <p>CITY, STATE & ZIP SALT LAKE CITY UT 84117</p>	<p><small>(Optional officers may be listed in space provided below.)</small></p> <p>7. <u>Vernon Utley, Program Director</u></p> <p><u>790 N. Main</u></p> <p><u>Alpine, Utah 84004</u></p> <p>8. <u>James K. Smith, Assistant Program Director</u></p> <p><u>2899 Branch Dr.</u></p> <p><u>Holladay, Utah 84117</u></p> <p>9. <u>Wendy Ruppel, Program Coordinator</u></p> <p><u>994 Oakhills Way</u></p> <p><u>Salt Lake City, Utah 84108</u></p> <p>10. <u>Shirley Cutler, Intake Coordinator</u></p> <p><u>1343 Seville Dr.</u></p> <p><u>Bountiful, Utah 84010</u></p>
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MINIMUM OF THREE MUST BE LISTED IN SPACE PROVIDED BELOW.

<p>GOVERNING BOARD OF TRUSTEES</p> <p>11. NAME STEVE GUNN (GUNN)</p> <p>ADDRESS 4515 S 2995 W</p> <p>CITY, STATE & ZIP SALT LAKE CITY UT 84117</p> <p>12. NAME DAVID OSTLER</p> <p>ADDRESS 2666 HILLSDEN DR</p> <p>CITY, STATE & ZIP SALT LAKE CITY UT 84117</p> <p>13. NAME ROBERT B HANSEN</p> <p>ADDRESS 838 18TH AVE</p> <p>CITY, STATE & ZIP SALT LAKE CITY UT 84103</p>	<p>11. <u>Marie George</u></p> <p><u>770 1200 North</u></p> <p><u>Bountiful, Utah 84010</u></p> <p>12. <u>Nancy Chappuis</u></p> <p><u>12 Circle Oak</u></p> <p><u>Sandy, Utah 84070</u></p> <p>13. _____</p>
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(Additional Officers or Governing Board of Trustees may be listed on the back of this form)

<p>Under penalties of perjury and as an authorized officer, I declare that this annual report and, if applicable, the statement change of registered office and/or agent, has been examined by me and is, to the best of my knowledge and belief, true, correct, and complete.</p>	<p>14. BY <u>Robert B. Hansen</u></p> <p align="center"><small>MUST BE SIGNED BY A CORPORATE OFFICER OR TRUSTEE</small></p> <p>15. <u>Accounting Secretary</u></p> <p align="center"><small>(Title or Position)</small></p> <p>16. <u>August 8</u> 1994</p> <p align="center"><small>(Date)</small></p>
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IF THERE ARE NO CHANGES FROM THE PREVIOUS YEAR, AND YOU HAVE ALL CORPORATE REQUIREMENTS FILLED YOU MAY DETACH THE COUPON BELOW AND RETURN IT IN THE ENCLOSED ENVELOPE WITH YOUR PAYMENT. YOU MAY KEEP THE ABOVE REPORT FOR YOUR RECORDS.