STATE OF UTAH
DEPARTMENT OF COMMERCE
DIVISION OF CORPORATIONS AND COMMERCIAL CODE
PHONE: (801) 530-4849

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Utah Div. of Corp. Comm. Code

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.

CORPORATE NAME, REGISTERED AGENT, REGISTERED OFFICE, CITY, STATE & ZIP

CORPORATION # 122542 N/A
D 09/26/86
1. LIFE-LINE, INC.
2. ROBERT B HANSEN
3. 1130 W CENTER ST
4. NORTH SALT LAKE UT 84054

MAKE ALL CORRECTIONS IN THIS COLUMN

(Print New Agent Name) NEW AGENT MUST SIGN

NEW REGISTERED STREET ADDRESS REQUIRED

(New City) UTAH REGISTERED AGENT MUST BE IN UTAH (ZIP)

WHEN CHANGING THE REGISTERED AGENT, THE NEW AGENT MUST SIGN. BOTH AGENT & ADDRESS CHANGES REQUIRE AN AUTHORIZED SIGNATURE ON LINE 14

5. INCORPORATED IN THE STATE AND UNDER THE LAWS OF: UTAH

6. ADDRESS OF THE PRINCIPAL OFFICE IN THE HOME STATE.
1130 W CENTER ST
NORTH SALT LAKE UT 84054

(Street Address) (City)

(State or Country) (ZIP)

OFFICERS

(Optional officers may be listed in space provided below.)

7. PRESIDENT
ADDRESS
CITY, STATE & ZIP

8. VICE PRESIDENT
ADDRESS
CITY, STATE & ZIP

9. SECRETARY — GLORIA WRIGHT
ADDRESS — 137 LINCOLN ST
CITY, STATE & ZIP — MIDVALE UT 84047

10. TREASURER — GLORIA WRIGHT
ADDRESS — 137 LINCOLN ST
CITY, STATE & ZIP — MIDVALE UT 84047

GOVERNING BOARD OF TRUSTEES

MINIMUM OF THREE MUST BE LISTED IN SPACE PROVIDED BELOW.

11. NAME — DAVID OSTLER
ADDRESS — 2666 HILLSDEN DR BX 17844
CITY, STATE & ZIP — SALT LAKE CITY UT 84117

12. NAME — KAREN CLIFFORD
ADDRESS — 23040 GUIDOTT
CITY, STATE & ZIP — SALINAS CA 93908

13. NAME — ROBERT B HANSEN
ADDRESS — 838 18TH AVE
CITY, STATE & ZIP — SALT LAKE CITY UT 84103

11. William I. Naylor
142 So. Coventry Lane
North Salt Lake, Utah 84054

12.

13.

(Additional Officers or Governing Board of Trustees may be listed on the back of this form)

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.

14. BY Gloria Wright (MUST BE SIGNED BY A CORPORATE OFFICER OR TRUSTEE)

15. Secretary (Title or Position)

16. 9-22 (Date) 19 97

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.

MAKE ALL CHANGES ON THE ANNUAL REPORT ABOVE