

No. <b>C 146354</b>		<b>Due no later than Nov 30, 2016</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )				
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  A PLUS HOME MEDICAL, INC. AARON M HESS 619 S WASHINGTON STREET SUITE 102 MOSCOW ID 83843-3063		AARON M HESS 1346 BRISTOL ROAD MOSCOW ID 83843				
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors, Treasurer (optional).								
Office Held	Name	Street or PO Address	City	State	Country	Postal Code		
PRESIDENT	AARON M HESS	1346 BRISTOL ROAD	MOSCOW	ID	USA	83843		
VICE PRESIDENT	AMANDA L HESS	1346 BRISTOL RD	MOSCOW	ID	USA	83843		
5. Organized Under the Laws of:  <b>ID</b> <b>C 146354</b>		6. Annual Report must be signed.*  Signature: AARON HESS Name (type or print): AARON HESS						Date: 09/26/2016 Title: PRESIDENT
Processed 09/26/2016		* Electronically provided signatures are accepted as original signatures.						