No. <b>C 166032</b>		Due no later than Mar 31, 2018		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  NITA HOME HEALTH, INC.  NITA R. PICCIONI  1217 E. LONE CREEK DR.  EAGLE ID 83616		1217 E. LOI EAGLE ID	NITA R PICCIONI  1217 E. LONE CREEK DR. EAGLE ID 83616  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE				(-1:1)				
2000 000 000		ess Addresses o	f President, Secretary, and Directors. Treasu		Chaha	Carratur	Deetel Cede	
Office Held TREASURER	Name LOU PICCIONI		Street or PO Address  1217 E. LONE CREEK DR.	City EAGLE	State ID	Country USA	Postal Code 83616	
PRESIDENT	NITA R. PICCIONI		1217 E. LONE CREEK DR.	EAGLE	ID	USA	83616	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Lou Piccioni			Date: 01/23/2018			
C 166032		Name (type	or print): Lou Piccioni		Title: Treasurer			
Processed 01/23/2018	* Electronically provided signatures are accepted as original signatures.							