



## **Idaho Corporation Annual Report Form**

File online at: sosbiz.idaho.gov

Due no later than: 11/30/2020

Return completed form within 30 days to:

Idaho Secretary of State Attn: Annual Reports

				450 1	North 4th Street	į
Annu	ıal Report: No filing fee	if receiv	wed by the due date.  Boise, ID 83720  Phone: (208) 334-2300		Ć	
SOS Control	Number: 445723	F	Filing Status: Active-Good Standing			, i
Non-Profit Corporation (D)			ate Formed: 11/25/2002	Form	Formation Locale: ID	
Name and Mailing Address: ADVOCARE, INC. 4154 E 100 N RIGBY, ID 83442-5800			(1) Add or Change Mailing Address:			
	<u> </u>	_				
KARIN FRY 4 <del>154 E 100 N</del> RIGBY, ID 8	3442		fice address must be a physic	1830 Sda)	RALBOA AT	TK 3404
(3) New Regi	stered Agent (RA) Sigr	nature:	If a new agent is appointed in ite	em (2) above, the ne	w agent must sign here to ac	ccept the appointment
(4) Corporations	Enter names and business	addresses (v	vith zip code) of the President, \	Vice President, Se	cretary, Treasurer.	
Title	Name		Business Address		City, State, Zip II	Atto FALLS, ID,
MESIDEN		( )	1830BAL	<del></del>	TOTAL STATE OF THE PARTY.	63409 ×
V. P	KYM HENDKI	15 P	7373 2 MDA D	K'	TOYLD FAIT	2 ID 83401
SEC.	SHERRY CURN	iul I	310 W 2 KX 8	A A A DT V	RIGBY ID	83415
TREA.	ectors names and husiness and	dresses (wit	h zin code). Attach additional s		TQ. 13-11	4 ID 83464
(5) Board of Directors names and business addresses (with zip code). Attach additional sheet if necessary.    Name   Business Address   City, State, Zip						3,000
SAME DIR: K ASS.DIL: SECR: TREAS! K	SHERRY CURNUTT	183	O BALBOA, APT G SANDY DR	T K	IDAHO FALLS IDAHO FALLS RIGBYID. IDAHO FALLS	83442
(5) Signature:	Land I	+		(6) Date: 12	112/2020	
(7) Type/Print Na	me: KARIN F	RY			ESIDENT	

Instructions: Legibly complete the form above. Sign and date this form and return to the address provided above.