

No. <b>W 5028</b>		<b>Due no later than Nov 30, 2010</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>1. Mailing Address: Correct in this box if needed.</b>  ASPEN HOME HEALTH PRIVATE DUTY, LLC ROBERT N COLLETTE 3470 WASHINGTON PARKWAY IDAHO FALLS ID 83404		ROBERT N COLLETTE 3470 WASHINGTON PARKWAY IDAHO FALLS ID 83404			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MEMBER	Name ROBERT N COLLETTE	Street or PO Address 2305 CHANNING WAY		City IDAHO FALLS	State ID	Country USA	Postal Code 83404
5. Organized Under the Laws of:  <b>ID</b> <b>W 5028</b>		6. Annual Report must be signed.*  Signature: Robert Collette Name (type or print): Robert Collette  Date: 09/08/2010 Title: Member					
Processed 09/08/2010      * Electronically provided signatures are accepted as original signatures.							