

No. C107119	Annual Report Form Due No Later Than November 30, 1999		2. Registered Agent and Office NOT A P.O. BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1 Mailing Address Please Correct if Not Correct PERSONAL HOME CARE, INC. CHERI L WEBSTER PO BOX 52		CHERI L WEBSTER 214 PINE MACKAY ID 83251
* FIRST NOTICE *		MACKAY ID 83251	3. Organized Under the Laws of: ID C107119
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)			
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>
President	Cheri Webster	214 Pine	Mackay
Secretary	Greg Webster	214 Pine	Mackay
Director	Cheri Webster	214 Pine	Mackay
			State ID Zip
			ID 83257
			ID 83251
			ID * 83257
5. Signature of New Registered Agent		6. Signature <u></u> Date <u>8/17/99</u> Name (Typed or Printed) <u>Cheri Webster</u> Title <u>Director</u>	

ISSUED: 07-03-1999

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