

No. W 96970		Due no later than Oct 31, 2015		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form		PAMELA J PETERSEN 5433 N FARROW ST BOISE ID 83713			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		LIVING HOPE ELDER CARE, LLC PAMELA J PETERSEN 5433 N FARROW ST BOISE ID 83713					
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	PAMELA J PETERSEN	5433 N. FARROW ST.	BOISE	ID	USA	83713	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 96970		Signature: Pamela J Petersen				Date: 10/22/2015	
		Name (type or print): Pamela J Petersen				Title: Manager	
Processed 10/22/2015		* Electronically provided signatures are accepted as original signatures.					