

No. C 75343		Due no later than Mar 31, 2012 Annual Report Form		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		1. Mailing Address: Correct in this box if needed. NORTHWEST HOME MEDICAL, INC. VERONICA R MADDOX 2600 TECHNOLOGY DRIVE SUITE 300 ORLANDO FL 32804-8024 USA		NATIONAL REGISTERED AGENTS INC 1423 TYRELL LANE BOISE ID 83706 USA			
				3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	PHILIP L CARTER	2600 TECHNOLOGY DRIVE SUITE 300	ORLANDO	FL	USA	32804-8024	
SECRETARY	REBECCA L MYERS	2600 TECHNOLOGY DRIVE SUITE 300	ORLANDO	FL	USA	32804-8024	
DIRECTOR	PHILIP L CARTER	2600 TECHNOLOGY DRIVE SUITE 300	ORLANDO	FL	USA	32804-8024	
DIRECTOR	REBECCA L MYERS	2600 TECHNOLOGY DRIVE SUITE 300	ORLANDO	FL	USA	32804-8024	
TREASURER	STEVEN P ALSENE	2600 TECHNOLOGY DRIVE SUITE 300	ORLANDO	FL	USA	32804-8024	
5. Organized Under the Laws of: ID C 75343		6. Annual Report must be signed.* Signature: Rebecca L. Myers Name (type or print): Rebecca L. Myers Date: 01/28/2012 Title: Secretary					
Processed 01/28/2012		* Electronically provided signatures are accepted as original signatures.					