No. C 131327		Due no later than Nov 30, 2018		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. MULTI-CARE HOME HEALTH SERVICES, INC. ROBIN R. WALLIS 4000 MULDOON PL BOISE ID 83713		ROBIN WALLIS 4000 MULDOON PL BOISE ID 83713 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Busine		ness Addresses of Presiden	t Secretary and Directors Treasurer	(ontional)			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
SECRETARY	MARY L. W	'ALLIS	4000 MULDOON PL	BOISE	ID	USA	83713
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID C 131327		Signature: Robin R. Wallis		Date: 09/18/2017			
		Name (type or print):	Title: President				
Processed 09/18/2017	7	* Electronically provided signatures are accepted as original signatures.					