

No. W 73787		Due no later than Apr 30, 2010		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		CHRIS CASTEEL 6014 W RANDOLPH BOISE ID 83709			
		1. Mailing Address: Correct in this box if needed. A-1 HOME HEALTH CARE LLC TAMMIE M CASTEEL 6014 W RANDOLPH BOISE ID 83709 USA		3. <u>New</u> Registered Agent Signature:*			
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	
MEMBER	BAHAR SHAMS	12935 WEST FERNLEAF	BOISE	ID	USA	83713	
MEMBER	SAIDA SHAMS	12935 WEST FERNLEAF	BOISE	ID	USA	83713	
MEMBER	CHRIS K CASTEEL	6014 WEST RANDOLPH	BOISE	ID	USA	83709	
MEMBER	TAMMIE M CASTEEL	6014 W RANDOLPH	BOISE	ID	USA	83709	
5. Organized Under the Laws of: ID W 73787		6. Annual Report must be signed.* Signature: Tammie Name (type or print): Tammie Date: 04/14/2010 Title: Partner					
Processed 04/14/2010		* Electronically provided signatures are accepted as original signatures.					