

No.

C101909

## Annual Report Form

Due No Later Than November 30,

1996

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

ALPINE HOME HEALTH, INC.  
VIVIAN ALEXIS HOOPER  
P O BOX 916

VIVIAN ALEXIS HOOPER  
3745 STONE CREEK WY

BOISE ID 83703

3. Organized Under the Laws of:

\* FIRST NOTICE \*

SANDPOINT ID 83864

ID C101909

4. Corporations: Enter Names and Addresses of President, Secretary and Directors

Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)

Office held	Name	Street or P.O. Address	City	State	Zip
President	Vivian A. Hooper	1200 Westwood Dr. #44	Sandpoint	ID	83864
Secretary	Kenneth E. Hooper	1200 Westwood Dr. #44	Sandpoint	ID	83864
Directors:	Vivian A. Hooper	1200 Westwood Dr. #44	Sandpoint	ID	83864
	Kenneth E. Hooper	1200 Westwood Dr. #44	Sandpoint	ID	83864

5.

NATURE OF BUSINESS

HOME HEALTH SERVICES

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature

Date 07/24/96

Name

(Typed or Printed)

Vivian A. Hooper

Title

President

ISSUED: 07-06-1996

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