

No. C 179667		Due no later than Aug 31, 2011		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 1. Mailing Address: Correct in this box if needed. RES-CARE WASHINGTON, INC. DAVID S WASKEY 9901 LINN STATION RD LOUISVILLE KY 40223-3808		CT CORPORATION SYSTEM 1111 W JEFFERSON STE 530 BOISE ID 83702 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
DIRECTOR	TAMIE BARTA	9901 LINN STATION ROAD	LOUISVILLE	KY	USA	40223-3808
PRESIDENT	PATRICK KELLY	9901 LINN STATION RD	LOUISVILLE	KY	USA	40223-3808
SECRETARY	DAVID S WASKEY	9901 LINN STATION RD	LOUISVILLE	KY	USA	40223-3808
DIRECTOR	DAVID RHODES	9901 LINN STATION ROAD	LOUISVILLE	KY	USA	40223-3808
DIRECTOR	DAVID W. MILES	9901 LINN STATION ROAD	LOUISVILLE	KY	USA	40223-3808
DIRECTOR	PATRICK KELLEY	9901 LINN STATION ROAD	LOUISVILLE	KY	USA	40223-3808
TREASURER	DAVID W. MILES	9901 LINN STATION ROAD	LOUISVILLE	KY	USA	40223-3808
5. Organized Under the Laws of: DE C 179667		6. Annual Report must be signed.* Signature: David S. Waskey Name (type or print): David S. Waskey Date: 06/13/2011 Title: Secretary				
Processed 06/13/2011		* Electronically provided signatures are accepted as original signatures.				