No. C 98600		Due	2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		HANNA L V	HANNA L VERMAAS		
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. HEARTHSIDE HOME HEALTH AGENCY, INC. HANNA L VERMAAS 1403 LEADORE AVE PO BOX 1090 SALMON ID 83467-1090		1403 LEADORE AVE SALMON ID 83467-1090			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Name	es and Busin	ess Addresses of F	President, Secretary, and Directors. Treasure	er (optional).			
Office Held	Office Held Name		Street or PO Address	City	State	Country	Postal Code
PRESIDENT HANNA L VERMAAS SECRETARY WILLIAM L VERMAAS		1403 LEADORE AVE PO BOX 1090 1403 LEADORE AVE PO BOX 1090	SALMON SALMON	ID ID	USA USA	83467-1090 83467-1090	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID C 98600		Signature: Har		Date: 03/17/2009			
		Name (type or		Title: President			
Processed 03/17/2009 * Electronically provided signatures are accepted as original signatures.							