

No. <b>C 126161</b>		<b>Due no later than Oct 31, 2009</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  MUELLER CARE CENTER, INC. BRENT W MUELLER 2860 CHANNING WAY STE 211 IDAHO FALLS ID 83404		BRENT W MUELLER 2860 CHANNING WAY STE 211 IDAHO FALLS ID 83404			
				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	
PRESIDENT	BRENT W LESUEUR	2860 CHANNING WAY, SUITE 211	IDAHO FALLS	IC	USA	83404	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID C 126161</b>		Signature: W. Brig LeSueur				Date: 10/30/2009	
		Name (type or print): W. Brig LeSueur				Title: Office Manager	
Processed 10/30/2009		* Electronically provided signatures are accepted as original signatures.					