

No. W 115886		Due no later than Jul 31, 2015		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		PAUL JOHNSON 955 GOOBY SANDPOINT ID 83864	
		1. Mailing Address: Correct in this box if needed. A.F.S. HOME HEALTH, L.L.C. PAUL JOHNSON 515 PINE ST STE G SANDPOINT ID 83864		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
MANAGER	PAUL JOHNSON	708 SUPERIOR	SANDPOINT	ID	USA 83836
5. Organized Under the Laws of:		6. Annual Report must be signed.*			
ID W 115886		Signature: paul johnson		Date: 05/18/2015	
		Name (type or print): paul johnson		Title: administrator	
Processed 05/18/2015		* Electronically provided signatures are accepted as original signatures.			