

No. <b>C 210210</b>		<b>Due no later than Jun 30, 2017</b> <b>Annual Report Form</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>1. Mailing Address: Correct in this box if needed.</b>  ICARE VOCATIONAL SUPPORTS, INC. CARI R GILBERT 4840 N ROSEPOINT WAY STE C BOISE ID 83713 USA		CARI R GILBERT 4840 N ROSEPOINT WAY STE C BOISE ID 83713			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors, Treasurer (optional).						3. <u>New</u> Registered Agent Signature:*	
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	CARI R GILBERT	1903 N WINDSOR PARK AVE	MIDDLETON	ID	USA	83644	
5. Organized Under the Laws of:  <b>ID</b> <b>C 210210</b>		6. Annual Report must be signed.*  Signature: Cari R Gilbert Name (type or print): Cari R Gilbert					
		Date: 04/27/2017 Title: President					
Processed 04/27/2017      * Electronically provided signatures are accepted as original signatures.							