

No. <b>C 37405</b>		<b>Due no later than Apr 30, 2014</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>		ROBERT VANDE MERWE 1524 W. CAYUSE CREEK DR MERIDIAN ID 83646			
		<b>1. Mailing Address: Correct in this box if needed.</b>		3. <u>New</u> Registered Agent Signature:*			
		IDAHO HEALTH CARE ASSOCIATION-IDAHO CENTER FOR ASSISTED LIVING, INC. R. VANDE MERWE EXECUTIVE DIRECTOR 1524 W. CAYUSE CREEK DR MERIDIAN ID 83646 USA					
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	
SECRETARY	TOM MOSS	7091 W. EMERALD STREET	BOISE	ID	USA	83704	
TREASURER	BRIAN BAGLEY	605 JOSEPH AVE	WINCHESTER	ID	USA	83555	
PRESIDENT	JOHN SCHULKINS	210 CLEVELAND BLVD	CALDWELL	ID	USA	83605	
VICE PRESIDENT	TROY BELL	1033 W QUINN ROAD	POCATELLO	ID	USA	83202	
5. Organized Under the Laws of:  <b>ID C 37405</b>		6. Annual Report must be signed.* Signature: Angie Graves Name (type or print): Angie Graves					
				Date: 04/24/2014		Title: Office Manager	
Processed 04/24/2014		* Electronically provided signatures are accepted as original signatures.					