

No. <b>C 117555</b>	<b>Due no later than Dec 31, 2010</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>		ROBERT A FRY 811 S WASHINGTON EMMETT ID 83629			
	GEM HOME MEDICAL, INC. ROBERT A FRY 11 PIONEER ROAD HORSESHOE BEND ID 83617		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
SECRETARY	ROBERT A FRY	11 PIONEER ROAD	HORSESHOE BEND	ID	USA	83629
DIRECTOR	GAYLE FRY	11 PIONEER ROAD	HORSESHOE BEND	ID	USA	83629
PRESIDENT	ROBERT A FRY	11 PIONEER ROAD	HORSESHOE BEND	ID	USA	83629
5. Organized Under the Laws of:  <b>ID C 117555</b>	6. Annual Report must be signed.* Signature: Robert A. Fry Name (type or print): Robert A. Fry		Date: 01/06/2011 Title: President			
Processed 01/06/2011		* Electronically provided signatures are accepted as original signatures.				