No. C 139581	Due no later than Jun 30, 2017		2	2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON	Annual Report Form 1. Mailing Address: Correct in this box if needed. A & A A SPECIAL TOUCH HOME CARE, INC CHRISTINE J FLEMING PO BOX 933 HOMEDALE ID 83628		1	CHRISTINE J FLEMING 216 W IDAHO 216 W ID HOMEDALE ID 83628 3. New Registered Agent Signature:*				
PO BOX 83720 BOISE, ID 83720-0080			3					
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Names and Busir	ness Addresses of	President, Secretary, and Directors. Trea	asurer (o	ptional).				
Office Held Name		Street or PO Address		City	State	Country	Postal Code	
SECRETARY CHRISTINE	J FLEMING	PO BOX 933		HOMEDALE	ID	USA	83628	
5. Organized Under the Laws of: 6. Annual Report must be signed.*								
ID	Signature: christine fleming			Date: 04/27/2017				
C 139581 Name (type or print): christine fleming		r print): christine fleming		Title: sec				
Processed 04/27/2017	* Electronically provided signatures are accepted as original signatures.							