No. C 127334		Due no later than Jan 31, 2013		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 1. Mailing Address: Correct in this box if needed. TLC ADULT CARE INC. AMBREA WRIGHT PO BOX 519 REXBURG ID 83440 USA		STEVE J HART 108 W 1ST S REXBURG ID 83440 3. New Registered Agent Signature:*					
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).									
	Name		Street or PO Address		City	State	Country	Postal Code	
TREASURER	STEVEN J HART AMBREA WRIGHT AMBREA WRIGHT		PO BOX 519 2863 E. HIGHWAY 33 2863 E. HIGHWAY 33		REXBURG SUGAR CITY SUGAR CITY	ID ID ID	USA USA USA	83440 83448 83448	
5. Organized Under the Laws of:		6. Annual Report must be signed.*							
ID C 127334		Signature: Steve Hart Name (type or print): Steve Hart			Date: 11/09/2012 Title: Agent				
Processed 11/09/2012	ssed 11/09/2012 * Electronically provided signatures are accepted as original signatures.								