

No. <b>C 179328</b>		<b>Due no later than Jul 31, 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>		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705 USA		
		<b>1. Mailing Address: Correct in this box if needed.</b> RES-CARE IDAHO, INC. DAVID S WASKEY 9901 LINN STATION RD LOUISVILLE KY 40223-3808		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
DIRECTOR	DAVID RHODES	9901 LINN STATION ROAD	LOUISVILLE	KY	USA	40223-3808
DIRECTOR	D. ROSS DAVISON	9901 LINN STATION ROAD	LOUISVILLE	LK	USA	40223-3808
TREASURER	D. ROSS DAVISON	9901 LINN STATION ROAD	LOUISVILLE	KY	USA	40223-3808
DIRECTOR	PATRICK KELLEY	9901 LINN STATION ROAD	LOUISVILLE	KY	USA	40223-3808
PRESIDENT	PATRICK KELLEY	9901 LINN STATION RD	LOUISVILLE	KY	USA	40223-3808
SECRETARY	STEVEN S REED	9901 LINN STATION RD	LOUISVILLE	KY	USA	40223-3808
VICE PRESIDENT	DAVID RHODES	9901 LINN STATION ROAD	LOUISVILLE	KY	USA	40223-3808
5. Organized Under the Laws of:  <b>DE C 179328</b>		6. Annual Report must be signed.* Signature: Steven S. Reed Name (type or print): Steven S. Reed		Date: 05/12/2014 Title: Secretary		
Processed 05/12/2014		* Electronically provided signatures are accepted as original signatures.				