No. C 164748		Due no later than Jan 31, 2017		2. Registered Agent and Address (NO PO BOX)			
Return to:	Annua	Annual Report Form		DALE PFEIL			
SECRETARY OF STATE	1. Mailing Address: (1. Mailing Address: Correct in this box if needed. ADDERSON HEALTHCARE OF IDAHO, INC. DALE G PFEIL 3120 W. BELLTOWER DR. STE 175		3120 W. BELLTOWER DR. STE 175 MERIDIAN ID 83646			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	DALE G PFEIL						
	MERIDIAN ID 83646	MERIDIAN ID 83646		3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Corporations: Enter Names and	Business Addresses of President,	Secretary, and Directors. Treasure	er (optional).				
Office Held Name	S	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT DALE G PFEIL		000 W. NEWBURY CT.	EAGLE	ID	USA	83616	
5. Organized Under the Laws of: 6. Annual Report must be signed.*							
ID	Signature: Dale Pfeil	Signature: Dale Pfeil		Date: 11/24/2016			
C 164748	Name (type or print): D	Name (type or print): Dale Pfeil		Title: President			
Processed 11/24/2016	* Electronically provided sign	* Electronically provided signatures are accepted as original signatures.					