

REINSTATEMENT

No.	C 50022		Annual Report Form																										
Return to:	1. Mailing Address - Please Correct, If Not Correct IDAHO ASSOCIATION OF HOME HEALTH AGENCIES CONNIE SEARLES ELIZABETH BARNETT 2419 N STATE ST #5 PO BOX 6508 BOISE ID 83702 83701-6508																												
FEE DUE	10 AM 10 AM SECRETARY OF STATE STATE OF IDAHO																												
2. Registered Agent and Office NOT A P.O. BOX CONNIE SEARLES ELIZABETH 2419 N STATE ST #5 BARNETT 11968 La Grange St BOISE ID 83702 Boise Idaho 83709																													
3. Organized Under the Laws of: ID C 50022																													
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <table style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 15%;">Office Held</th> <th style="width: 25%;">Name</th> <th style="width: 25%;">Street or P.O. Address</th> <th style="width: 15%;">City</th> <th style="width: 15%;">State</th> <th style="width: 15%;">Zip</th> </tr> <tr> <td>PRESIDENT</td> <td>GARY THIETEN</td> <td>P.O. Box 6508</td> <td>Boise</td> <td>Id</td> <td>83701</td> </tr> <tr> <td>SECRETARY/</td> <td>DAN KNIGHT</td> <td>P.O. Box 6508</td> <td>Boise</td> <td>Id</td> <td>83701</td> </tr> <tr> <td>TREASURER</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>						Office Held	Name	Street or P.O. Address	City	State	Zip	PRESIDENT	GARY THIETEN	P.O. Box 6508	Boise	Id	83701	SECRETARY/	DAN KNIGHT	P.O. Box 6508	Boise	Id	83701	TREASURER					
Office Held	Name	Street or P.O. Address	City	State	Zip																								
PRESIDENT	GARY THIETEN	P.O. Box 6508	Boise	Id	83701																								
SECRETARY/	DAN KNIGHT	P.O. Box 6508	Boise	Id	83701																								
TREASURER																													
5. Signature of New Registered Agent <i>Elizabeth Barnett</i>			6. Signature <i>Elizabeth Barnett</i> Date <u>5/1/99</u> Name (Typed or Printed) <i>Elizabeth Barnett</i> Title <u>Exec. Director</u>																										

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

- 1.) Please pay special attention to the mailing address. If it is incorrect, please make the appropriate corrections.
NOTE: The name of the business entity cannot be altered on the annual report form.
- 2.) If the registered agent has changed or moved, please make that correction on this form. The registered agent must be found IN IDAHO at a PHYSICAL ADDRESS. PO Boxes WILL NOT be accepted. If report is for a Limited Liability please refer to #4 below.
- 3.) Corporation: Enter names and addresses of ONLY the president, secretary, and directors in block 4.
 Limited Liability Company: Enter the names and addresses of the managers or members in block 4.
NOTE: Putting "same as last year" WILL NOT be accepted.
- 4.) Limited Liability Company: If the registered agent has been changed in block 2, then the NEW registered agent must accept that position by signing in block 5.
- 5.) Corporation: Block 6 must be signed by an officer or chairman of the board of the corporation. Signer must specify his or her title.
 Limited Liability Company: Block 6 must be signed by a manager or member, who must specify his or her title.
 If new registered Agent, please sign block 5.