No. W 41083		Due no later than Jul 31, 2009		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. UTAH HOME HEALTH AND HOSPICE, LLC ROBERT COLLETTE PO BOX 3881 IDAHO FALLS ID 83403		3470 WASHIN	ROBERT COLLETTE 3470 WASHINGTON PKWY IDAHO FALLS ID 83404 3. New Registered Agent Signature:*			
				3 New Registers				
NO FILING FEE IF RECEIVED BY DUE DATE		IDANO FALES	0.570.5	3. <u>110.W</u> Registers	3. New Registered Agent Signature.			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.								
Office Held N	lame		Street or PO Address	City	State	Country	Postal Code	
MANAGER ROBERT COI		LLETTE	3470 WASHINGTON PKWY	IDAHO FALLS	ID	USA	83404	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Rob		Date: 05/27/2009				
W 41083		Name (type or		Title: Manager				
Processed 05/27/2009 * Electronically provided signatures are accepted as original signatures.								