

No. C 132375	Due no later than Feb 28, 2003 Annual Report Form	2. Registered Agent and Office 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	1. Mailing Address - Correct in this box, if applicable FIRST CHOICE HOME CARE & HOSPICE, I DEBRA L GATES 147 MAIN AVE E TWIN FALLS, ID 83301	DEBRA L GATES 147 MAIN AVE E TWIN FALLS, ID 83301 3. New Registered Agent Signature																																										
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 10%;"><u>Office held</u></th> <th style="text-align: left; width: 25%;"><u>Name</u></th> <th style="text-align: left; width: 30%;"><u>Street or P.O. Address</u></th> <th style="text-align: left; width: 15%;"><u>City</u></th> <th style="text-align: left; width: 10%;"><u>State</u></th> <th style="text-align: left; width: 10%;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>PRES.</td> <td>DEBRA GATES-MOGELSON</td> <td>147 MAIN AVE. E.</td> <td>TWIN FALLS</td> <td>ID</td> <td>83301</td> </tr> <tr> <td>DIRECTOR</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>SEC.</td> <td>STANLEY MOGELSON</td> <td>600 SHOSHONE ST.</td> <td>TWIN FALLS</td> <td>ID</td> <td>83301</td> </tr> <tr> <td>DIRECTOR</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>TREAS.</td> <td>BARBARA R BACON</td> <td>147 MAIN AVE. E.</td> <td>TWIN FALLS</td> <td>ID</td> <td>83301</td> </tr> <tr> <td>DIRECTOR</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	PRES.	DEBRA GATES-MOGELSON	147 MAIN AVE. E.	TWIN FALLS	ID	83301	DIRECTOR						SEC.	STANLEY MOGELSON	600 SHOSHONE ST.	TWIN FALLS	ID	83301	DIRECTOR						TREAS.	BARBARA R BACON	147 MAIN AVE. E.	TWIN FALLS	ID	83301	DIRECTOR					
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5. Organized Under the Laws of: IDAHO C 132375	6. Signature <u>Barbara R Bacon</u> Date <u>2-28-03</u> Name (Typed or Printed) <u>BARBARA R BACON</u> Title <u>TREASURER</u>																																											