No. C 142662	Due no later than February 28, 2009 **Annual Report Form**	2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 **NO FILING FEE IF RECEIVED BY DUE DATE**	1. Mailing Address - Correct in this box, if applicable HOMELIFE CARE, INC. CARLENE A MADALENA 3649 NORTH 1900 EAST FILER, ID 83328	CARLENE A MADALENA 3649 NORTH 1900 EAST FILER, ID 83328 3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

Office held	Name	Street or P.O. Address	City	State	Zip
President	Carlene Madalena	3649 N 1900 E	Filer	Idaho	83328
V. President	Tony Madalena	3649 N 1900 E	Filer	Idaho	83328
Secretary	Carlene Madalena	3649 N 1900 E	Filer	Idaho	83328
Directors					
#1	Larry Lowry	730 Apache Way	Twin Falls	Idaho	83301
#2	Desiree Wiles	1912 E. Lost River Ave.	Nampa	Idaho	83686
#3	Greg Wiles	1912 E. Lost River Ave.	Nampa	Idaho	83686

5. Organized Under the Laws of:	6.
IDAHO C 142662	Signature [signature] Date 01-19-2009 Name (Typed or Printed) Carlene Madalena Title President

Issued 12/01/2008

Do Not Tape or Staple

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