No. C 105616		Due	2. Registered Ag	2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		WANDA BEBE	WANDA BEBB 936 E CENTER ST POCATELLO ID 83201 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.		10-00-00 MIC 200-00-00 MIC 20-00-00				
		PROHEALTH HOME CARE SERVICES, INC. WANDA -BEBB-ANDREWS 936 E CENTER ST POCATELLO ID 83201						
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Name	es and Busin	ess Addresses of Pi	resident, Secretary, and Directors. Treas	surer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
TREASURER PAT WOODN		1AN	530 TAYLOR LN	INKOM	ID	USA	83245	
SECRETARY WANDA BEBI		B-ANDREWS	125 E. LETA DR.	INKOM	ID	USA	83245	
PRESIDENT	JAMES C AN	NDREWS	936 EAST CENTER ST.	POCATELLO	ID	USA	83201	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: WAI		Date: 01/24/2018				
C 105616		Name (type or print): WANDA ANDREWS			Title: SECRETARY			
Processed 01/24/2018	* Electronically provided signatures are accepted as original signatures.							