

FILED EFFECTIVE

REINSTATEMENT

No. C 57860	Annual Report Form ADMIN DISSOLVED 02/10/1999		2. Registered Agent and Office NOT A P.O. BOX																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00	COMMUNITY HOME HEALTH, INC. VERLENE KAISER 1108 W MYRTLE ST STE 220 2739 STARCREST DRIVE BOISE, ID 83702-8312		GARDNER W SKINNER, JR. 1423 TYRELL LANE BOISE, ID 83706																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)			3. <u>New</u> registered agent signature																		
<table border="0"><thead><tr><th>Office held</th><th>Name</th><th>Street or P.O. Address</th><th>City</th><th>State</th><th>Zip</th></tr></thead><tbody><tr><td>PRESIDENT</td><td>VERLENE D KAISER</td><td>2739 STARCREST DR.</td><td>Boise</td><td>ID</td><td>83712</td></tr><tr><td>SECRETARY/ TREASURER</td><td>GARY L. KAISER</td><td>" "</td><td>" "</td><td>" "</td><td>" "</td></tr></tbody></table> SECRETARY OF STATE STATE OF IDAHO DEC-3 PM 3:52				Office held	Name	Street or P.O. Address	City	State	Zip	PRESIDENT	VERLENE D KAISER	2739 STARCREST DR.	Boise	ID	83712	SECRETARY/ TREASURER	GARY L. KAISER	" "	" "	" "	" "
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PRESIDENT	VERLENE D KAISER	2739 STARCREST DR.	Boise	ID	83712																
SECRETARY/ TREASURER	GARY L. KAISER	" "	" "	" "	" "																
5. Organized under the laws of: IDAHO C 57850		6. Signature <u>Verlene D Kaiser</u> Date <u>11/01/04</u> Name (Typed or Printed) <u>VERLENE D. KAISER</u> Title <u>owner/adm.</u>																			

Issued 10/28/2004 by SL1