

No. C 85183	Due no later than Nov 30, 2009 Annual Report Form		2. Registered Agent and Address (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 needed. SPOKANE HOME HEALTH CARE, INC. WAYNE SETZER W. 1309 FIRST SPOKANE WA 99201		TWYLA SETZER W. 212 IRONWOOD DRIVE, STE E COEUR D'ALENE ID 83814			
			3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
SECRETARY	TWYLA B SETZER	1309 W 1ST AVE	SPOKANE	WA	USA	99201
PRESIDENT	WAYNE SETZER	1309 W 1ST AVE	SPOKANE	WA	USA	99201
5. Organized Under the Laws of: WA C 85183	6. Annual Report must be signed.* Signature: Twyla Setzer Name (type or print): Twyla Setzer		Date: 12/29/2009 Title: Secretary			
Processed 12/29/2009		* Electronically provided signatures are accepted as original signatures.				