

No. **C 137136**

Due no later than Jan 31, 2002

Annual Report Form

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
~~ADVANCED HOME HEALTH CARE, INC.~~

877 N LIBERTY STE 205

BOISE, ID 83704

2. Registered Agent and Office **NO PO BOX**

BRENT OWENS
877 N LIBERTY STE 205

BOISE, ID 83704

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 Brent Owens 877 N. Liberty Ste. 205 Boise ID 83704

5. Organized Under the Laws of:

IDAHO

C 137136

6.

Signature

Brent Owens

Date

12/20/01

(Typed or