

## INSTRUCTIONS ON REVERSE SIDE

|                                                                                                                        |                                                                                                                                                 |                                                                             |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|
| No. 97767                                                                                                              | Idaho Corporation Annual Report Form                                                                                                            | 2. Registered Agent and Office NOT A P.O. BOX                               |
| Return To                                                                                                              | Due No Later Than November 15, 1995                                                                                                             | MILES GREEN<br>277 WEST CENTER                                              |
| Secretary of State<br>700 W Jefferson<br>P.O. Box 83720<br>Boise, ID 83720-0080<br>* FIRST NOTICE *<br>NO FEE REQUIRED | 1. Mailing Address - Please Complete if Not Current<br>COMMUNITY CARE ASSOCIATES, INC.<br>MILES GREEN<br>277 WEST CENTER<br><br>VICTOR ID 83455 | VICTOR ID 83455<br><br>3. Incorporated Under The Laws of<br>ID<br>NO: 97767 |

## 4. Names and Addresses of Officers and Directors

|            | Name           | Street or P.O. Address | City   | State | Postal Code |
|------------|----------------|------------------------|--------|-------|-------------|
| President: | Miles L. Green | 277 W. Center          | Victor | ID    | 83455       |
| Secretary: |                | P.O. Box 15            |        |       |             |
| Directors: |                |                        |        |       |             |

## 5. Nature of Business

IN Home care

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

|                         |                       |       |         |
|-------------------------|-----------------------|-------|---------|
| Signature               | <i>Miles L. Green</i> | Date  | 10/5/95 |
| Name (Typed or Printed) | Miles L. Green        | Title | Pres.   |