

No. C 72440		Due no later than Mar 31, 2014		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. IDAHO HOME HEALTH & HOSPICE, INC. GARY L THIETTEN 2138 TUSCANY CREEK WAY DRAPER UT 84020		GARY L THIETTEN 121 TIGER TAIL DRIVE SAWTOOTH CITY ID 83278			
				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	JAN THIETTEN	2138 TUSCANY CREEK WAY	DRAPER	UT	USA	84020	
PRESIDENT	GARY L THIETTEN	2138 TUSCANY CREEK WAY	DRAPER	UT	USA	84020	
5. Organized Under the Laws of: ID C 72440		6. Annual Report must be signed.* Signature: Gary L Thietten Name (type or print): Gary L Thietten Date: 01/30/2014 Title: President					
Processed 01/30/2014		* Electronically provided signatures are accepted as original signatures.					