

No. C 179667		Due no later than Aug 31, 2017		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. RES-CARE WASHINGTON, INC. STEVEN S REED 9901 LINN STATION RD LOUISVILLE KY 40223-3808		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705		
				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
TREASURER	RALPH G GRONEFELD, JR.	9901 LINN STATION ROAD	LOUISVILLE	KY	USA	40223
DIRECTOR	STEVEN ZELLER	9901 LINN STATION ROAD	LOUISVILLE	KY	USA	40223
PRESIDENT	STEVEN ZELLER	9901 LINN STATION ROAD	LOUISVILLE	KY	USA	40223
DIRECTOR	MEGAN LORENZ	9901 LINN STATION ROAD	LOUISVILLE	KY	USA	40223
SECRETARY	STEVEN S REED	9901 LINN STATION RD	LOUISVILLE	KY	USA	40223-3808
DIRECTOR	FLANNA PERKINS	9901 LINN STATION ROAD	LOUISVILLE	KY	USA	40223
VICE PRESIDENT	FLANNA PERKINS	9901 LINN STATION ROAD	LOUISVILLE	KY	USA	40223
5. Organized Under the Laws of: DE C 179667		6. Annual Report must be signed.* Signature: Steven S. Reed Name (type or print): Steven S. Reed Date: 06/20/2017 Title: Secretary				
Processed 06/20/2017		* Electronically provided signatures are accepted as original signatures.				