| No. C 161552 | | Due no later than Jul 31, 2007 2. Registered Agent and Address (NO PO BO) | | | | |
|--|-------------------------|---|--|----------|------------|----------------|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. CARE ONE SERVICES AGENCY, INC. DAWN BINGHAM 1352 S MERIDIAN | DAWN BINGHAM 1352 S MERIDIAN BLACKFOOT ID 83221 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Busine | | BLACKFOOT ID 83221 USA ess Addresses of President, Secretary, and Directors. Treasurer | | | | |
| | Name | Street or PO Address | City | State | Country | Postal Code |
| SECRETARY | ralph pow Dawn bingi | ELL 1352 S MERIDIAN | BLACKFOOT BLACKFOOT | ID ID | USA USA | 83221 83221 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | |
| ID | | Signature: Dawn Bingham | Date: 06/29/2007 | | | |
| C 161552 | | Name (type or print): Dawn Bingham | Title: President | | | |
| Processed 06/29/2007 * Electronically provided signatures are accepted as original signatures. | | | | | | |