No. C 179667		D	ue no later than Aug 31, 2010	2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
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. RES-CARE WASHINGTON, INC. DAVID S WASKEY 9901 LINN STATION RD LOUISVILLE KY 40223-3808		CT CORPORATION SYSTEM 1111 W JEFFERSON STE 530 BOISE ID 83702 USA 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE		LOUISVILLE NI TUZZS-SOUO		3. 13634 Registered Agent Signature.				
4. Corporations: Enter I	Names and Busin	ess Addresses of	President, Secretary, and Directors. Treasur	er (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	DAVID RHODES		9901 LINN STATION ROAD	LOUISVILLE	KY	USA	40223-3808	
DIRECTOR	RECTOR DAVID W. MILES		9901 LINN STATION ROAD	LOUISVILLE	KY	USA	40223-3808	
DIRECTOR PATRICK KELLEY		LLEY	9901 LINN STATION ROAD	LOUISVILLE	KY	USA	40223-3808	
TREASURER	DAVID W. MILES		9901 LINN STATION ROAD	LOUISVILLE	KY	USA	40223-3808	
PRESIDENT	ESIDENT PATRICK KELLY		9901 LINN STATION RD	LOUISVILLE	KY	USA	40223-3808	
SECRETARY	DAVID S W	ASKEY	9901 LINN STATION RD	LOUISVILLE	KY	USA	40223-3808	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
DE		Signature: David S. Waskey			Date: 06/11/2010			
C 179667		Name (type or print): David S. Waskey			Title: Secretary			
Processed 06/11/2010		* Electronically	provided signatures are accepted as original s	signatures.				