

No. C 119973	Due no later than Jun 30, 2017 Annual Report Form		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	1. Mailing Address: Correct in this box if needed. ASPEN HEALTHCARE INC. ROBERT COLLETTE PO BOX 3881 IDAHO FALLS ID 83403-3881		ROBERT N COLLETTE 3470 WASHINGTON PARKWAY IDAHO FALLS ID 83404			
			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
PRESIDENT	ROBERT COLLETTE	3470 WASHINGTON PARKWAY	IDAHO FALLS	ID	USA	83404
SECRETARY	JAIMI WILLSON	3470 WASHINGTON PARKWAY	IDAHO FALLS	ID	USA	83404
5. Organized Under the Laws of: ID C 119973	6. Annual Report must be signed.* Signature: ROBERT COLLETTE Name (type or print): ROBERT COLLETTE		Date: 05/03/2017 Title: PRESIDENT			
Processed 05/03/2017		* Electronically provided signatures are accepted as original signatures.				