

No. C 98561	Annual Report Form <i>Due No Later Than November 30, 1997</i>		2 Registered Agent and Office NOT A P.O. BOX CHRISTOPHER CLOSE 923 16TH AV LEWISTON ID 83501	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1 Mailing Address - Please Correct, If Not Correct ABLE HOME HEALTH SERVICES, I 823 16TH AVE LEWISTON ID 83501		3 Organized Under the Laws of ID C 98561	
* FIRST NOTICE *				
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)				
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>
President	Christopher Close	9049 Finucane Dr.	Hayden	Id 83835
Secretary	Christopher close	9049 Finucane Dr.	Hayden	Id 83835
Executive Director,	Linda Close	1515 Lochhaven	Hayden	Id 83835
5.		6. Signature  Date 7-15-97 Name (Typed or Printed) Christopher C. Close Title President		

ISSUED: 07-04-1997

DO NOT TAPE OR STAPLE

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