

No. C 200658		Due no later than Dec 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		CARI GILBERT 8116 OPEN SKY RD MIDDLETON ID 83644			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		ICARE SUPPORTED LIVING, INC CARI R GILBERT 4840 N ROSEPOINT WAY SUITE C BOISE ID 83713 USA					
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	CARI R GILBERT	4840 SUITE C	BOISE	ID	USA	83713	
DIRECTOR	CARI GILBERT	4840 N. SUITE C	BOISE	ID	USA	83713	
SECRETARY	CARI GILBERT	4840 N. RO SUITE C	BOISE	ID	USA	83713	
5. Organized Under the Laws of: ID C 200658		6. Annual Report must be signed.* Signature: Cari R Gilbert Name (type or print): Cari R Gilbert					
				Date: 11/20/2017		Title: President	
Processed 11/20/2017		* Electronically provided signatures are accepted as original signatures.					