

No. C 100962	Reinstatement Annual Report Form ADMIN DISSOLVED 05/10/2013		2. Registered Agent and Office (NOT A P.O. BOX)
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. TLC HOME HEALTH CARE AND NURSING, INC. GLEN AMADOR 7456 W STATE BOISE ID 83714		GLEN AMADOR 7456 W STATE BOISE ID 83714
REINSTATEMENT FEE DUE: \$30.00			3. <u>New</u> Registered Agent Signature.
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres.			
Office Held <i>President</i> <i>Glen Amador</i>	Name	Street or PO Address <i>612 Charil Valley</i>	City State Country Postal Code <i>Las Vegas NV . 89138</i>
5. Organized Under the Laws of: IDAHO C 100962	6. Signature <i>Rhonda Dahm</i> Name (type or print): <i>Rhonda Dahm</i>		Date: <i>7/15/13</i> Title: <i>Corp. Sec.</i>
Issued 07/15/2013 by LJC			

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM