

No. C 185724		Due no later than Jan 31, 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. COUNTRY LIVING RETIREMENT HOMES INC TAMI NICHOLS 255 N. BLUE LAKES BLVD #710 TWIN FALLS ID 83301 USA		TAMI NICHOLS 1852 EAST 2900 NORTH BUHL ID 83301-8330			
						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	TAMI NICHOLS	255 N. BLUE LAKES BLVD #710	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of: ID C 185724		6. Annual Report must be signed.* Signature: Tami Nichols Name (type or print): Tami Nichols					
		Date: 02/20/2017 Title: President					
Processed 02/20/2017 * Electronically provided signatures are accepted as original signatures.							