

No. C120713

Annual Report Form 1999

Due No Later Than November 30,

Return to:
 SECRETARY OF STATE
 700 WEST JEFFERSON
 PO BOX 83720
 BOISE, ID 83720-0080

NO FEE REQUIRED

* FIRST NOTICE *

1. Mailing Address - Please Correct, If Not Correct

ALL VALLEY HOME HEALTH CARE,
 GLEN AMADOR
 7456 W STATE

BOISE ID 83703

2. Registered Agent and Office NOT A P.O. BOX

GLEN AMADOR
 7456 W STATE

BOISE ID 83703

3. Organized Under the Laws of:

ID C120713

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)

Office held

Name

Street or P.O. Address

City

State

Zip

President GLEN AMADOR 7456 W. STATE BOISE ID 83703
 Secretary GLEN AMADOR 5970 N. CREWE BOISE ID 83703

5. Signature of New Registered Agent

6.

Signature

Name (Typed or Printed)



Date

Title

12-20-98

Asst. Admin

ISSUED: 07-03-1999

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