No. **C 164390**	**Due no later than Jan 31, 2014**	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** **1. Mailing Address: Correct in this box if needed.** CAREWISE HEALTH, INC. KATHERINE MAY 9200 SHELBYVILLE ROAD SUITE 700 LOUISVILLE KY 40222 USA	NATIONAL REGISTERED AGENTS INC 921 S ORCHARD ST STE G BOISE ID 83705 USA 3. New 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	JERROLD KREISLER	9200 SHELBYVILLE ROAD SUITE 700	LOUISVILLE	KY	USA	40222
SECRETARY	RANDALL K JUSTICE	9200 SHELBYVILLE ROAD SUITE 700	LOUISVILLE	KY	USA	40222
DIRECTOR	JERROLD KREISLER	9200 SHELBYVILLE ROAD SUITE 700	LOUISVILLE	KY	USA	40222
TREASURER	JAMES TERBEEST	9200 SHELBYVILLE ROAD SUITE 700	LOUISVILLE	KY	USA	40222

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
DE **C 164390**	Signature: Katherine May	Date: 12/02/2013
	Name (type or print): Katherine May	Title: Legal Admin

Processed 12/02/2013

* Electronically provided signatures are accepted as original signatures.