No. C 136701		Due no later than Dec 31, 2009 Annual Report Form 1. Mailing Address: Correct in this box if needed. ADVANCED HEALTH CARE CORPORATION K BRETT NATTRESS 215 N WHITLEY STE 1 FRUITLAND ID 83619		2. Registered A	Registered Agent and Address (NO PO BOX) K BRETT NATTRESS			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE								
				215 N WHITLEY STE 1 FRUITLAND ID 83619 3. New Registered Agent Signature:*				
								4. Corporations: Enter
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY	DAVID E NA	TTRESS	215 N WHITLEY DRIVE SUITE 1	FRUITLAND	ID	USA	83619	
DIRECTOR	DAVID W N	ATTRESS	215 N WHITLEY DRIVE SUITE 1	FRUITLAND	ID	USA	83619	
PRESIDENT	K BRETT NATTRESS		215 N WHITLEY DRIVE SUITE 1	FRUITLAND	ID	USA	83619	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: K Brett Nattress			Date: 10/23/2009			
C 136701		Name (type or		Title: President				
Processed 10/23/2009	9	* Electronically pr	ovided signatures are accepted as original s	signatures.				