No. C 105616		Due no later than Mar 31, 2016 Annual Report Form 1. Mailing Address: Correct in this box if needed. PROHEALTH HOME CARE SERVICES, INC. WANDA -BEBB-ANDREWS 936 E CENTER ST POCATELLO ID 83201		2. Registered Ag	2. Registered Agent and Address (NO PO BOX) WANDA BEBB 936 E CENTER ST POCATELLO ID 83201 3. New Registered Agent Signature:*			
Return to:				10 CONTROL OF THE PROPERTY OF				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE								
				3. <u>110.W</u> Register				
4. Corporations: Enter I	Names and Busin	ess Addresses of Pr	esident, Secretary, and Directors. Treas	surer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
VICE PRESIDENT	WANDA BEE	B-ANDREWS	936 EAST CENTER ST.	POCATELLO	ID	USA	83201	
TREASURER	MARK BLAN		3606 HAWTHORNE RD.	POCATELLO	ID	USA	83201	
SECRETARY			3606 HAWTHORNE RD	POCATELLO	ID	USA	83201	
PRESIDENT	JAMES C A	NDREWS	936 EAST CENTER ST.	POCATELLO	ID	USA	83201	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 105616		Signature: Joyce Blanscett			Date: 01/18/2016			
		Name (type or print): Joyce Blanscett			Title: Secretary			
Processed 01/18/2016		* Electronically pro	vided signatures are accepted as origina	al signatures.				