

No. <b>W 84461</b>	<b>Due no later than Jun 30, 2013</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b> ADVANCED HOME HEALTH AND HOSPICE, LLC 890 OXFORD DR IDAHO FALLS ID 83401		SUSAN E JONES 432 N 4135 E RIGBY ID 83442			
			3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER	JAMES G ADAMSON	PO BOX 12269	PORTLAND	OR	USA	97212
5. Organized Under the Laws of:  <b>ID W 84461</b>	6. Annual Report must be signed.* Signature: James Adamson Name (type or print): James Adamson		Date: 04/25/2013 Title: Manager			
Processed 04/25/2013		* Electronically provided signatures are accepted as original signatures.				