

No. 05183	Idaho Corporation Annual Report Form	2. Registered Agent and Office NOT A P.O. BOX
Return To Secretary of State Room 203, Statehouse P.O. BOX 83720 Boise, ID 83720-0080 * FIRST NOTICE * NO FEE REQUIRED	Due No Later Than November 1, 1994	BRET SETZER 224 IRONWOOD DR IRONWOOD SQUARE COEUR D'ALENE ID 83814
	1. Mailing Address — <i>Please Correct If Not Correct</i> SPOKANE HOME HEALTH CARE, INC. WAYNE SETZER W. 1309 FIRST SPOKANE WA 99204	

4. Names and Addresses of Officers and Directors		MUST BE PRINTED OR TYPED				
	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	
President:	WAYNE C. SETZER	W. 1309 1 st Ave.	Spokane,	WA.	99204	
Secretary:	TWYLA B. SETZER	W. 1309 1 st Ave.	Spokane,	WA	99204	
Directors:	WAYNE C. SETZER	W. 1309 1 st Ave	Spokane,	WA.	99204	
	TWYLA B. SETZER	W. 1309 1 st Ave.	Spokane	WA.	99204	

5. Nature of Business Resale - Medical Supplies, Equipment.	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <u>Twyla Setzer</u> Date <u>7/18/94</u> Name <small>(Typed or Printed)</small> Title <u>Corp. Sec - 1 year</u>
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