

No. <b>C 126917</b>		<b>Due no later than Dec 31, 2011</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>1. Mailing Address: Correct in this box if needed.</b>  THERESA STEVENS HOME CARE, INC. THERESA S. STEVENS 915 LOWER SYRINGA RD SANDPOINT ID 83864 USA		THERESA STEVENS 915 LOWER SYRINGA RD SANDPOINT ID 83864			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> 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	
DIRECTOR	KENNETH E STEVENS	915 LOWER SYRINGA RD.	SANDPOINT	ID	USA	83864	
DIRECTOR	THERESA S STEVENS	915 LOWER SYRINGA RD.	SANDPOINT	ID	USA	83864	
SECRETARY	KENNETH E STEVENS	915 LOWER SYRINGA RD.	SANDPOINT	ID	USA	83864	
PRESIDENT	THERESA S STEVENS	915 LOWER SYRINGA RD.	SANDPOINT	ID	USA	83864	
5. Organized Under the Laws of:  <b>ID</b> <b>C 126917</b>		6. Annual Report must be signed.*  Signature: Ken Stevens Name (type or print): Ken Stevens					
		Date: 01/09/2012 Title: Secretary					
Processed 01/09/2012 * Electronically provided signatures are accepted as original signatures.							