No. C 181495		Due no later than Jan 31, 2014		2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		VALLEY VISTA CARE CORPORATION				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. VALLEY VISTA CHARITABLE FOUNDATION, INC. SANDY KENNELLY 820 ELM ST ST MARIES ID 83861 USA			820 ELM ST ST MARIES ID 83861 3. New Registered Agent Signature:*			
4. Corporations: Enter Na	ames and Busin	ess Addresses of	President, Secretary, and Directors. Tr	reasurer (optional).			
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
DIRECTOR	JANICE MCC	CALL	89421 HWY 3 NORTH		ST. MARIES	ID	USA	83861
DIRECTOR	CLAUDIA SP	OONER	1006 WEST IDAHO		ST. MARIES	ID	USA	83861
VICE PRESIDENT	TRASK SILVA		PO BOX 336		ST MARIES	ID	USA	83861
PRESIDENT	PEG CARVER		2301 CROMWELL DR		ST MARIES	ID	USA	83861
DIRECTOR	WAYNE FOXWORTH		352 AHRS LOOP		ST MARIES	ID	USA	83861
DIRECTOR	RICHARD NYQUIST		831 MAIN AVENUE		ST MARIES	ID	USA	83861
SECRETARY	MICHELE MCDANIEL		PO BOX 606		ST MARIES	ID	USA	83861
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Kasey Borgman			Date: 11/25/2013			
C 181495		Name (type or print): Kasey Borgman			Title: Director of Corp Compliance			
Processed 11/25/2013 * Electronically provided signatures are accepted as original signatures.								