

No. W 107030	Due no later than Sep 30, 2017 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: 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. AGAPE COUNSELING, PLLC JOHN W SZUDERA MS LMFT, LCPC 4347 N. LANCER AVE BOISE ID 83713 USA		JOHN SZUDERA MS LMFT LCPC 4347 N. LANCER AVE BOISE ID 83713-8371			
			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	JOHN W SZUDERA	4347 N. LANCER AVE	BOISE	ID	USA	83713
5. Organized Under the Laws of: ID W 107030	6. Annual Report must be signed.* Signature: John Szudera Name (type or print): John Szudera		Date: 07/24/2017 Title: LMFT, LCPC			
Processed 07/24/2017		* Electronically provided signatures are accepted as original signatures.				