No. C 174218	1	Due no later than Jul 31, 2011		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		DR BRUCE B BLASCH 4561 W FARM VIEW DR BOISE ID 83714			
SECRETARY OF STATE	1. Mailing	1. Mailing Address: Correct in this box if needed.					
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	INC.	BLASCH EDUCATION AND REHABILITATION CONSULTANTS, INC. BRUCE B BLASCH 4561 W FARM VIEW DR BOISE ID 83714 USA					
				3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE	N 1000 10						
4. Corporations: Enter Names and E	Business Addresses o	f President, Secretary, and Directors. Treasure	r (optional).				
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
	W BLASCH	608 N. DAVIS ST. APT. #B	HELENA	MT	USA	59601	
PRESIDENT DR BARI	BARA BLASCH	4561 W FARM VIEW DR	BOISE	ID	USA	83714	
5. Organized Under the Laws of:	6. Annual Repo	6. Annual Report must be signed.*					
GA	Signature: E	Signature: Bruce B. Blasch		Date: 06/02/2011			
C 174218	Name (type	Name (type or print): Bruce B. Blasch		Title: Ceo			
Processed 06/02/2011	* Electronically	* Electronically provided signatures are accepted as original signatures.					