No. <b>W 18025</b>		Due no later than Feb 28, 2011		2. Registered	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		Annual Report Form  1. Mailing Address: Correct in this box if needed.  COUNSELING ASSOCIATES, PLLC BECKY YANCEY PO BOX 1685 EAGLE ID 83616		LYNN CURVEY LCSW 742 E STATE ST STE 160 EAGLE ID 83616				
				3. <u>New</u> Registered Agent Signature:*				
200	Enter Nar	nes and Addresse	es of at least one Member or Manager.					
Office Held Nar	me		Street or PO Address	City	State	Country	Postal Code	
	LYNN CURVEY LCSW BECKY YANCEY LCSW		742 E. STATE STREET SUITE 160 742 E STATE STREET SUITE 160	EAGLE EAGLE	ID ID	USA USA	83616 83616	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Be	Date: 12/11/2010					
W 18025		Name (type o	Title: Manager					
Processed 12/11/2010		* Electronically provided signatures are accepted as original signatures.						