

No. 73560	Idaho Corporation Annual Report Form		2. Registered Agent and Office
Return To	Due No Later Than November 1, 1990		LYNN F. ELLIS, PH.D.
Secretary of State	1. Mailing Address — Please Correct	1199 SHORELINE LANE, #200	
Room 203, Statehouse	MOUNTAIN VIEWS, INC.		BOISE ID 82702 190
Boise, ID 83720	C/O HEALTH PSYCHOLOGY INC		3. Incorporated Under The Laws
NO FEE REQUIRED	1199 SHORELINE LANE, #200		of ID
BOISE	ID 83702		NO: 073560

## 4. Names and Addresses of Officers and Directors

	Name	Street or P.O. Address	City	State	Zip
President:	LYNN F. ELLIS, PH.D.	1199 SHORELINE LANE, #200,	BOISE,	IDAHO	83702
Secretary:	_____	_____	_____	_____	_____
Directors:	_____	_____	_____	_____	_____

## 5. Nature of Business

Education & Training  
for Adolescents

## 6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature

Name (Typed or Printed)

*[Signature]* PH.D.  
LYNN F. ELLIS, PH.D.

Date

Title

7/9/90  
PRESIDENT