

No. <b>W 36468</b>		<b>Due no later than Feb 29, 2012</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  CAMAS PROFESSIONAL COUNSELING, L.L.C. SUMMER YORKE PO BOX 627 102 N COLLEGE GRANGEVILLE ID 83530 USA		TAMMY EVERSON 102 N COLLEGE GRANGEVILLE ID 83530	
				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
MEMBER	TAMMY EVERSON	RR1 BOX 213E	COTTONWOOD	ID	USA 83522
5. Organized Under the Laws of:  <b>ID W 36468</b>		6. Annual Report must be signed.* Signature: EmilyL Everson Name (type or print): EmilyL Everson Date: 01/18/2012 Title: Bookkeeper			
Processed 01/18/2012		* Electronically provided signatures are accepted as original signatures.			