

No. C 142106		Due no later than Jan 31, 2011 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. DIVERSIFIED SOCIAL SERVICES, INC. KRISTINA L NICHOLAS ANDERSON 28396 N SILVER MEADOWS LOOP ATHOL ID 83801 USA		KRISTINA NICHOLAS ANDERSON 28396 N SILVER MEADOWS LOOP ATHOL ID 83801			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors, Treasurer (optional).						3. <u>New</u> Registered Agent Signature:*	
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	KRISTINA LYNN NICHOLAS ANDERSON	28396 SILVER MEADOWS LOOP	ATHOL	ID	USA	83801	
5. Organized Under the Laws of: ID C 142106		6. Annual Report must be signed.* Signature: Kristina L Nicholas Anderson Name (type or print): Kristina L Nicholas Anderson Date: 02/13/2011 Title: President					
Processed 02/13/2011		* Electronically provided signatures are accepted as original signatures.					