

No. C 160102		Due no later than Apr 30, 2007		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. TURNING POINT COUNSELING & PARTIAL CARE CENTER, INC. RITA NAUMAN 3330 HIGHWAY 30 WEST POCATELLO ID 83201		RITA NAUMAN 2625 S FAIRWAY DR POCATELLO ID 83201			
				3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	RITA L NAUMAN	3330 HIGHWAY 30 WEST	POCATELLO	ID	USA	83201	
SECRETARY	TOM M NAUMAN	3330 HIGHWAY 30 WEST	POCATELLO	ID	USA	83201	
TREASURER	NICOLE M NAUMAN-GILLIAM	3330 HIGHWAY 30 WEST	POCATELLO	ID	USA	83201	
5. Organized Under the Laws of: IDAHO C 160102		6. Annual Report must be signed.* Signature: NICOLE NAUMAN-GILLIAM Name (type or print): NICOLE NAUMAN-GILLIAM Date: 05/08/2007 Title: SECRETARY					
Processed 05/08/2007		* Electronically provided signatures are accepted as original signatures.					