

No. <b>C 135174</b>	<b>Due no later than Aug 31, 2009</b> <b>Annual Report Form</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>1. Mailing Address: Correct in this box if needed.</b> PEAKS TO PLAINS THERAPY SERVICES, P.A. BRIAN LANE OLSON 2184 CHANNING WAY #400 IDAHO FALLS ID 83404 USA		BRIAN LANE OLSON 510 E 17TH ST #400 IDAHO FALLS ID 83404			
			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	BRIAN L OLSON	2184 CHANNING WAY #400	IDAHO FALLS	ID	USA	83404
5. Organized Under the Laws of:  <b>ID C 135174</b>	6. Annual Report must be signed.* Signature: Brian L. Olson Name (type or print): Brian L. Olson		Date: 09/16/2009 Title: President			
Processed 09/16/2009		* Electronically provided signatures are accepted as original signatures.				