No. <b>W 77812</b>		Due no later than Sep 30, 2017	2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form	JERILYN GOWEN 1909 S 10TH AVE CALDWELL ID 83605  3. New Registered Agent Signature:*				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  PREVENTION ASSOCIATES, LLC  JERI GOWEN  1909 S 10TH AVE  CALDWELL ID 83605					
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Com	panies: Enter Nai	mes and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER DEBI JENSEI		N 17020 HOMEDALE ROAD	CALDWELL	ID	USA	83607	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: Jeri Gowen	Date: 08/05/2017				
W 77812		Name (type or print): Jeri Gowen	Title: Clinical Director				
Processed 08/05/2017 * Electronically provided signatures are accepted as original signatures.							