No. C 119167		Due no later than Apr 30, 2011		2. R	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			MICHAEL ZEIMANTZ 5461 W ANTLER ROAD RATHDRUM ID 83858 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. THERAPY SOLUTIONS, P.C. MICHAEL R ZEIMANTZ 5461 W ANTLER ROAD RATHDRUM ID 83858		R				
NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Busine		USA	esident, Secretary, and Directors. Trea	esurer (ontic	onal)			
Office Held	Name	icss Addresses of Fre	Street or PO Address	Cit	-	State	Country	Postal Code
PRESIDENT	MICHAEL R	ZEIMANTZ JR	5461 W. ANTLER ROAD		THDRUM	ID	USA	83858
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 119167		Signature: Michael R Zeimantz			Date: 05/01/2011			
		Name (type or print): Michael R Zeimantz			Title: President			
Processed 05/01/2011		* Electronically prov	ided signatures are accepted as origin	nal signature	es.			