No. C 98848		Due no later than Jun 30, 2009		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON		Annual Report Form 1. Mailing Address: Correct in this box if needed. OREGON TRAIL CENTER, INC. ALLEN HARRISON 320 N 4TH PO BOX 323 MONTPELIER ID 83254		ALLEN HARRISON 320 N 4TH MONTPELIER ID 83254 3. New Registered Agent Signature:*			
PO BOX 83720 BOISE, ID 83720-0080	ALLEN HAR 320 N 4TH						
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Corporations: Enter Names an	d Business Addresses o	of President, Secretary, and Directors. Treas	urer (optional).				
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
	POULSEN EA MATTSON	65 SMOKY BEAR CIRCLE 529 JEFFERSON ST	FISH HAVEN MONTPELIER	ID ID	USA USA	83287 83254	
5. Organized Under the Laws of: 6. Annual Re		ort must be signed.*					
ID	Signature: I	Signature: Becky Smith		Date: 04/13/2009			
C 98848	Name (type	Name (type or print): Becky Smith		Title: Director			
Processed 04/13/2009	* Electronically	* Electronically provided signatures are accepted as original signatures.					