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|--|--|---|--|-------|---------|-------------|--|
| No. W 100669 | Due no later than Feb 28, 2014 Annual Report Form | | 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 | 1. Mailing Address: Correct in this box if needed. EAGLE CREST COUNSELING, LLC ROBERT K. WHEELER 11444 N. DROVER DRIVE HAYDEN ID 83835 USA | | ROBERT WHEELER 11444 N. DROVER DRIVE HAYDEN ID 83835 | | | | |
| | | | 3. <u>New</u> Registered Agent Signature:* | | | | |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager. | | | | | | | |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code | |
| MEMBER | LISA C. WHEELER | 11444 N. DROVER DRIVE P.O. BOX 292 | HAYDEN | ID | USA | 83835 | |
| MANAGER | ROBERT K. WHEELER | 11444 N. DROVER DRIVE P.O. BOX 292 | HAYDEN | ID | USA | 83835 | |
| 5. Organized Under the Laws of: ID W 100669 | 6. Annual Report must be signed.* Signature: Lisa C. Wheeler Name (type or print): Lisa C. Wheeler | | Date: 01/01/2014 Title: Member | | | | |
| Processed 01/01/2014 | | * Electronically provided signatures are accepted as original signatures. | | | | | |