No. <b>C 170038</b>		Due no later than Nov 30, 2010	2. Registere	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	PAINT M JAMES F 315 FALL CSI OFFI	Annual Report Form ling Address: Correct in this box if neede lAGIC, INC. R FIELDS LS AVE ICE ON AGING ALLS ID 83301	d. 315 FALL CSI OFFI TWIN FA	JAMES R FIELDS 315 FALLS AVE CSI OFFICE ON AGING TWIN FALLS ID 83301  3. New Registered Agent Signature:*			
	d Business Address	ses of President, Secretary, and Directors. Trea	asurer (optional).				
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR ROD	PARRISH BURK N STOKER	906 BLUE LAKES BLVD N 550 WASHINGTON ST S 348 S PARK AVE W	TWIN FALI TWIN FALI TWIN FALI	LS ID	USA USA USA	83301 83301 83301	
5. Organized Under the Laws of	6. Annual F	Report must be signed.*					
l		re: Karen C Stoker type or print): Karen C Stoker		Date: 11/26/2010 Title: Secretary/Treasurer			
Processed 11/26/2010	* Electronically provided signatures are accepted as original signatures.						