No. W 76589		Due no later than Aug 31, 2013	2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		HELENE POULOS-EDMO			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. CENTER STREET HEALTH CARE, LLC BRENDA EKSTROM 1553 EAST CENTER ST POCATELLO ID 83201	POCATELLO	1553 EAST CENTER ST POCATELLO ID 83201 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA					
200		mes and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER CYNDI M RI		ICE 1553 EAST CENTER ST	POCATELLO	ID	USA	83201	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: Brenda Ekstrom	Date: 08/30/2013				
W 76589		Name (type or print): Brenda Ekstrom		Title: Book Keeper			
Processed 08/30/2013 * Electronically provided signatures are accepted as original signatures.							