
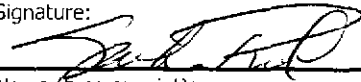


No. C 55549	Due no later than Apr 30, 2016 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) JEANA BOYD 225 E PALOUSE RIVER RD MOSCOW ID 83843															
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. LATAH ALLIANCE ON MENTAL ILLNESS, INC. (THE) JEANA BOYD P. O. BOX 8654 MOSCOW ID 83843		3. New Registered Agent Signature. 															
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Office Held</th> <th style="width: 20%;">Name</th> <th style="width: 30%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 15%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Chair</td> <td>SARAH RIAL</td> <td>PO BOX 8654</td> <td>MOSCOW</td> <td>ID</td> <td>USA</td> <td>83843</td> </tr> </tbody> </table>					Office Held	Name	Street or PO Address	City	State	Country	Postal Code	Chair	SARAH RIAL	PO BOX 8654	MOSCOW	ID	USA	83843
Office Held	Name	Street or PO Address	City	State	Country	Postal Code												
Chair	SARAH RIAL	PO BOX 8654	MOSCOW	ID	USA	83843												
5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO C 55549 </div>	6. Signature:  <hr/> Name (type or print): SARAH RIAL		Date: <div style="text-align: center;"> 4-17-16 </div> <hr/> Title: <div style="text-align: center;"> Chair </div>															
Issued 03/08/2016 by CLH			125851															

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM