No. W 30330		Due no later than Apr 30, 2012		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		GALEN LOUIS PH D			
SECRETARY OF STATE	1. Mailing	1. Mailing Address: Correct in this box if needed. PERFORMANCE PLANNING PARTNERS, LLC GALEN K LOUIS 1814 S ATLANTIC ST BOISE ID 83705 USA		1814 S ATLANTIC ST BOISE ID 83705			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	GALEN K LO						
	BOISE ID 8			3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE	USA						
4. Limited Liability Companies: Enter	Names and Addres	ses of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER GALEN LOUIS PH D		1814 S ATLANTIC ST	BOISE	ID	USA	83705	
5. Organized Under the Laws of:	ganized Under the Laws of: 6. Annual Report must be signed.*						
ID	Signature: 0	Signature: Galen Louis		Date: 05/07/2012			
W 30330	Name (type	Name (type or print): Galen Louis		Title: Owner			
Processed 05/07/2012	* Electronically	* Electronically provided signatures are accepted as original signatures.					