No. C 141487		Annual Report Form 1. Mailing Address: Correct in this box if needed. BETTER HEALTH & PLAY THERAPY, INC. RONA BRUMPTON 213 11TH AVENUE SOUTH		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				d. 213 11TH NAMPA II	RONA BRUMPTON 213 11TH AVENUE SOUTH NAMPA ID 83651 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Busin		USA Jess Addresses (of President, Secretary, and Directors. Tre	asurer (optional).	optional).			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	RONA BRUN	1PTON	P.O. BOX 768	STAR	ID	USA	83669	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature:	Rona Brumpton		Date: 09/14/2011			
C 141487		Name (type	or print): Rona Brumpton		Title: President			
Processed 09/14/2011	ocessed 09/14/2011 * Electronically provided signatures are accepted as original signatures.							