

No. C 163496

Due no later than November 30, 2007
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

SALMON MENTAL HEALTH CLINIC, P.A.
111 LILLIAN ST STE 101
SALMON, ID 83467PAMELA J BAGLIEN, PH.D.
111 LILLIAN ST STE 101
SALMON, ID 83467NO FILING FEE IF
RECEIVED BY DUE DATE3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
PRESIDENT	Pamela J. Baglien	111 Lillian ST, Ste 101	Salmon	Id	83467
CHAIRMAN	Jeffery F. Delys	15795 LEFFLER LAKE	Frenchtown	mt.	59834
SECRETARY	Howard CARROLL	111 LILLIAN ST. STE 101	Salmon	Id	83467

5. Organized Under the Laws of:
IDAHO
C 163496

6.

Signature

Pamela J. Baglien

Date

11/28/07

Name

(Typed or
Printed)

PAMELA J. BAGLIEN

Title

PRESIDENT

Issued 09/04/2007

Do Not Tape or Staple

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