

No. W 77768	Due no later than Sep 30, 2009 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. COMMUNI*KIDZ, PEDIATRIC THERAPY SERVICES LLC CHERYL M ZAREMBA 3705 AUGUSTA POCATELLO ID 83204 USA		CHERYL MARLER ZAREMBA 3705 AUGUSTA POCATELLO ID 83204			
			3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MEMBER	CHERYL M ZAREMBA	3705 AUGUSTA	POATELLO	ID	USA	83204
5. Organized Under the Laws of: ID W 77768		6. Annual Report must be signed.* Signature: Cheryl M Zaremba Name (type or print): Cheryl M Zaremba		Date: 09/04/2009 Title: Owner		
Processed 09/04/2009		* Electronically provided signatures are accepted as original signatures.				