No. C 142542		Due no later than Feb 28, 2013		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		HEATHER LE	HEATHER LEACH			
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. CLEARWATER SUBSTANCE ABUSE WORKGROUP, INC. SALLIE WILHELM PO BOX 1114 OROFINO ID 83544			410 JOHNSON AVE OROFINO ID 83544 3. New Registered Agent Signature:*			
				3. <u>New</u> Register				
4. Corporations: Enter Na	ames and Busin	ess Addresses of Pr	esident, Secretary, and Directors. Treas	surer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	STACI TAYLOR		P O BOX 1114	OROFINO	ID	USA	83544	
DIRECTOR	RICHARD WHITMORE		PO BOX 391	OROFINO	ID	USA	83544	
DIRECTOR	SUNNY BALES BALES		P O BOX 1114	OROFINO	ID	USA	83544	
DIRECTOR	JEFF WILSON		PO BOX 2603	OROFINO	ID	USA	83544	
SECRETARY	KELLY REGGEAR		1522 LOSETH RD	OROFINO	ID	USA	83544	
DIRECTOR	GARY BECK		PO BOX 2447	OROFINO	ID	USA	83544	
TREASURER	URER SALLIE WILHELM		13604 FREMONT AVE	OROFINO	ID	USA	83544	
DIRECTOR	HEATHER A	LEACH	PO BOX 391	OROFINO	ID	USA	83544	
5. Organized Under the Laws of: 6.		6. Annual Report must be signed.*						
ID C 142542		Signature: Sallie Wilhelm			Date: 01/15/2013			
		Name (type or print): Sallie Wilhelm			Title: Treasurer			
Processed 01/15/2013		* Electronically prov	vided signatures are accepted as original	al signatures.				