

No. C 157672		Due no later than Dec 31, 2011		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. KIM STOWELL SPEECH LANGUAGE PATHOLOGIST, INC. 3456 E 17TH ST STE 140 IDAHO FALLS ID 83406		KIM STOWELL 438 STARLIGHT IDAHO FALLS ID 83402			
				3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	KIM STOWELL	438 STARLIGHT	IDAHO FALLS,	ID	USA	83402	
SECRETARY	KIM STOWELL	438 STARLIGHT	IDAHO FALLS	ID	USA	83402	
DIRECTOR	KIM STOWELL	438 STARLIGHT	IDAHO FALLS	ID	USA	83402	
5. Organized Under the Laws of: ID C 157672		6. Annual Report must be signed.* Signature: Robert Crandall Name (type or print): Robert Crandall Date: 10/11/2011 Title: Attorney					
Processed 10/11/2011		* Electronically provided signatures are accepted as original signatures.					