No. <b>C 83888</b>		Due no later than May 31, 2012 Annual Report Form  1. Mailing Address: Correct in this box if needed.  MAGIC VALLEY YOUTH SERVICES, INC. SUSAN R BACA 1869 ADDISON AVE E TWIN FALLS ID 83301		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:				to recommend and the second recommendation	SUSAN R BACA			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				TWIN FALLS	1869 ADDISON AVE E TWIN FALLS ID 83301  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE				J. INCOV. Registered Agent Signature.				
4. Corporations: Enter Nam	es and Busin	ess Addresses of Pre	esident, Secretary, and Directors. Treasur	er (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY	ETARY WM. CRAIG NEBEKER		3248 LAURELWOOD DRIVE 1869 ADDISON AVENUE EAST 1869 ADDISON AVENUE EAST	TWIN FALLS TWIN FALLS TWIN FALLS	ID ID ID	USA USA USA	83301 83301 83301	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 83888		Signature: Susan R Baca Name (type or print): Susan R Baca			Date: 03/12/2012 Title: President			
Processed 03/12/2012 * Electronically provided signatures are accepted as original signatures.								