

No. <b>C 113022</b>		<b>Due no later than Dec 31, 2010</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b> IDAHO ALCOHOL/DRUG COUNSELOR CERTIFICATION, INC. CONNIE SEARLES PO BOX 1548 MERIDIAN ID 83680 USA		CHRIS DANIEL 66 N HASTINGS DR NAMPA ID 83687		
				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	MARY CHRISTY	530 W. 24TH ST.	BURLEY	ID	USA	83318
SECRETARY	PAT NEESER	5440 FRANKLIN RD.	BOISE	ID	USA	83705
DIRECTOR	TED WENZEL	2165 PATRICIA AVE.	BOISE	ID	USA	83704
5. Organized Under the Laws of:  <b>ID C 113022</b>		6. Annual Report must be signed.* Signature: Chris Daniel Name (type or print): Chris Daniel Date: 11/22/2010 Title: Exec. Director				
Processed 11/22/2010		* Electronically provided signatures are accepted as original signatures.				