



Idaho Corporation Annual Report Form

File online at: SOSBIZ.idaho.gov

Due on/Before: 11/30/2018

Reporting Year: 2018

Return completed form within 30 days to

Idaho Secretary of State

Attn: Annual Reports

450 North 4th Street

Boise, ID 83702

Phone: (208) 334-2300

Annual Report: No filing fee if received by due date.

If reinstatement is required, the reinstatement fee is \$30.00.

SOS Control Number: 478001

Filing Status: Active-Good Standing

Professional Service Corporation (D)

Date Formed: 11/17/2004

Formation Locale: ID

Name and Mailing Address:

(1) Add or Change Mailing Address:

BEEHIVE REHABILITATION AND COUNSELING, P.A.

490 PARK AVENUE SUITE 4

IDAHO FALLS, ID 83402

Registered Agent (RA) and Registered Office (RO) Address:

(2) Change RA and/or RO Address:

NANCY J MONSON

2900 ROLLANDET AVE

IDAHO FALLS, ID 83402

Note: The Registered Office address must be an Idaho address.

(3) New Registered Agent (RA) Signature:

If a new agent is appointed in item (2) above, the new agent must sign here to accept the appointment.

(4) Corporations: Enter names and business addresses (with zip code) of the President, Vice President, Secretary, Treasurer.

Title	Name	Business Address	City, State, Zip

(5) Board of Directors names and business address (with zip code). Attach additional sheet if necessary.

Name	Business Address	City, State, Zip
ERIC OLSON	490 Park #4	Idaho Falls, ID 83402

(5) Signature:

(6) Date:

11/8/18

(7) Type/Print Name:

ERIC OLSON

(8) Title:

Owner-Clinical Director

Instructions: Legibly complete the form above. Enclose a check made payable to the Idaho Secretary of State for \$30 if reinstating.

Sign and date this form and return to the address provided above.

B0027-4058 11/13/2018 11:41 AM Received by ID Secretary of State Lawrence Denney