No. C 194931 Return to:		Due no later than Jun 30, 2014 Annual Report Form	2. Registered Agent and Address (NO PO BOX) TAMI SUE JONES			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. IDAHO BEHAVIORAL HEALTH GROUP, INC. TAMI SUE JONES 2273 S. VISTA AVE. #190 BOISE ID 83705	BOISE ID	7116 ASHLAND DR BOISE ID 83709 3. New Registered Agent Signature:*		
RECEIVED BY DUE DATE		USA				
4. Corporations: Enter I	Names and Busin	ess Addresses of President, Secretary, and Directors. Treasurer	(optional).			
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
SECRETARY PRESIDENT	TAMI JONES		BOISE BOISE	ID ID	USA USA	83709 83709
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
ID		Signature: Tami Jones	Date: 04/22/2014			
C 194931		Name (type or print): Tami Jones	Title: President			
Processed 04/22/2014		* Electronically provided signatures are accepted as original sig	natures.			