

No. C 91327	Annual Report Form 1996 <i>Due No Later Than November 30,</i>		2. Registered Agent and Office NOT A P.O. BOX																			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct CENTER FOR HUMAN RELATIONS, GARY O. HORTON 636 PERSHING, SUITE B POCATELLO ID 83201		GARY O. HORTON 636 PERSHING, SUITE B POCATELLO ID 83201 3. Organized Under the Laws of: ID C 91327																			
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Arline May</td> <td>636 PERSHING</td> <td>Poc.</td> <td>Id</td> <td>83201</td> </tr> <tr> <td>Sec/Treas.</td> <td>Patrick Murphy</td> <td>SUITE B</td> <td>"</td> <td>"</td> <td>"</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	President	Arline May	636 PERSHING	Poc.	Id	83201	Sec/Treas.	Patrick Murphy	SUITE B	"	"	"
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5. NATURE OF BUSINESS PSYCHOLOGY PRACTICE		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <u><i>Gary O. Horton</i></u> Date <u>7-17-96</u> Name (Typed or Printed) <u>GARY O. HORTON</u> Title <u>CEO</u>																				

ISSUED: 07-06-1995

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