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| No. C 172329 | Due no later than March 31, 2008 Annual Report Form | | 2. Registered Agent and Office NO PO BOX |
| Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | 1. Mailing Address - Correct in this box, if applicable BEHAVIORAL HEALTH SOLUTIONS, P.A. 1044 ORCHARD LOOP RD TROY, ID 83871 | MARK F YAMA 1044 ORCHARD LOOP RD TROY, ID 83871 3. <u>New</u> Registered Agent Signature | |

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

| <u>Office held</u> | <u>Name</u> | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> |
|--------------------|---------------|-------------------------------|-------------|--------------|------------|
| President | Mark F. Yama | 1044 Orchard Loop Rd | Troy | ID | 83871 |
| Secretary | Shela B. Yama | 1044 Orchard Loop Rd | Troy | ID | 83871 |

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| 5. Organized Under the Laws of: IDAHO C 172329 | 6. Signature <u><i>Mark F. Yama</i></u> Date <u>3/12/08</u> Name (Typed or Printed) <u>Mark F. Yama</u> Title <u>President</u> | |
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