

No. C 141964		Due no later than Jan 31, 2007		2. Registered Agent and Address (NO PO BOX)		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. IDAHO ASSOCIATION FOR PLAY THERAPY, INC. JOHN G ST CLAIR 2105 CORONADO ST IDAHO FALLS ID 83404-7495		JOHN G ST CLAIR 2105 CORONADO ST IDAHO FALLS ID 83404-7495		
				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	KATHI TOMAZIN	P.O. BOX 1294	BLACKFOOT	ID	USA	83221
DIRECTOR	DONNA HATCH	834 FALLS AVE, SUITE 1280	TWIN FALLS	ID	USA	83301
DIRECTOR	ELLA DINGMAN	P.O. BOX 2306	POCATELLO	ID	USA	83206
DIRECTOR	LYNDELL JACKSON	2020 BLAINE ST.	CALDWELL	ID	USA	83605
DIRECTOR	PHYLIS MONTGOMERY	323 12TH AVE. RD.	NAMPA	ID	USA	83686
DIRECTOR	JYL ADAMS	596 W. OAKHAMPTON DR.	EAGLE	ID	USA	83616
DIRECTOR	MELINDA RUSSELL	323 12TH AVE. RD.	NAMPS	ID	USA	83686
5. Organized Under the Laws of: IDAHO C 141964		6. Annual Report must be signed.* Signature: John G. St. Clair Name (type or print): John G. St. Clair Date: 03/12/2007 Title: Registered Agent				
Processed 03/12/2007		* Electronically provided signatures are accepted as original signatures.				