

No. C 113022

Due no later than December 31, 2007  
Annual Report Form

2. Registered Agent and Office NO PO BOX

CONNIE SEARLES  
2419 WEST STATE ST #5  
BOISE, ID 837023. New Registered Agent Signature

Return to:

SECRETARY OF STATE  
450 NORTH FOURTH STREET  
PO BOX 83720  
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

IDAHO ALCOHOL/DRUG COUNSELOR CERTIF  
CONNIE SEARLES  
270 N 27TH ST STE B  
BOISE, ID 83702NO FILING FEE IF  
RECEIVED BY DUE DATE

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

Office held	Name	Street or P.O. Address	City	State	Zip
Pres	MARY CHRISTY	530 W 24th St	Burley	ID	83318
V.P.	JOHN SMITH	P.O. Box 742	Springville	ID	83530
Secretary	PAT NEUSER	5440 Franklin Rd St.	Boise	ID	83705

5. Organized Under the Laws of:

IDAHO  
C 113022

6.

Signature

Date

10/9/07

Name

(Typed or Printed)

Suzanne Johnson

Title

Admin Asst.

Issued 10/01/2007

Do Not Tape or Staple

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