

No. <b>C 55549</b>	<b>Due no later than Apr 30, 2014</b> <b>Annual Report Form</b>	2. Registered Agent and Address <b>(NO PO BOX)</b>
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b> LATAH ALLIANCE ON MENTAL ILLNESS, INC. (THE) JEANA BOYD P. O. BOX 8654 MOSCOW ID 83843	JEANA BOYD 225 E PALOUSE RIVER RD MOSCOW ID 83843
		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
PRESIDENT	JEANA BOYD	225 E PALOUSE RIVER DRIVE
City	State	Country
MOSCOW	ID	USA
Postal Code	83843	
5. Organized Under the Laws of:  <b>ID C 55549</b>	6. Annual Report must be signed.* Signature: Jeana Boyd Name (type or print): Jeana Boyd Date: 04/29/2014 Title: Officer	
Processed 04/29/2014 * Electronically provided signatures are accepted as original signatures.		