

No. W 95817	Due no later than Aug 31, 2011 Annual Report Form	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	1. Mailing Address: Correct in this box if needed. MOSCOW HEALING ARTS CENTER, LLC ALLEN COHRAN 230 W 3RD ST MOSCOW ID 83843	ALLEN COHRAN 230 W 3RD ST MOSCOW ID 83843	
		3. <u>New</u> Registered Agent Signature:*	
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.			
Office Held	Name	Street or PO Address	City State Country Postal Code
MEMBER	TELISA SWAN	230 W 3RD ST	MOSCOW ID USA 83843
MEMBER	ALLEN COHRAN	230 W 3RD ST	MOSCOW ID USA 83843
5. Organized Under the Laws of: ID W 95817	6. Annual Report must be signed.* Signature: Allen Coahran Name (type or print): Allen Coahran Date: 09/17/2011 Title: Member		
Processed 09/17/2011		* Electronically provided signatures are accepted as original signatures.	