No. W 41970		Due no later than Aug 31, 2009 Annual Report Form 1. Mailing Address: Correct in this box if needed. YOUTH TRAINING CENTER, LLC JULIE A VANORDEN PO BOX 2975 POCATELLO ID 83206-2975		2. Registered A	2. Registered Agent and Address (NO PO BOX) JULIE A VANORDEN 621 S 1ST AVE POCATELLO ID 83201			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE								
				3. <u>New</u> Registe	3. New Registered Agent Signature:*			
4. Limited Liability Comp	oanies: Enter Nai	mes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER	JULIE A VAI	VORDEN	425 S 1100 W	PINGREE	ID	USA	83262	
MEMBER	RYAN A PAI	RK	4739 REVOLUTION	CHUBBUCK	ID	USA	83202	
MEMBER	CAMILLE D	AGUINAGA	746 KRISTA CT	CHUBBUCK	ID	USA	83202	
5. Organized Under the Laws of:		6. Annual Report						
ID W 41970		Signature: Juli		Date: 06/15/2009				
		Name (type or		Title: Member				
Processed 06/15/2009		* Electronically provided signatures are accepted as original signatures.						