

No. C 137999		Due no later than Mar 31, 2009		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		EDWIN L LITTENEKER 322 MAIN ST LEWISTON ID 83501			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		SNAKE RIVER REHABILITATION SERVICES, INC. MICHAEL EMERY 1448 G STREET LEWISTON ID 83501					
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	MICHAEL EMERY	1448 G STREET	LEWISTON	ID	USA	83501	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID C 137999		Signature: Victoria Cunningham			Date: 01/09/2009		
		Name (type or print): Victoria Cunningham			Title: Office manager		
Processed 01/09/2009		* Electronically provided signatures are accepted as original signatures.					