

No. C 134912

Due no later than July 31, 2004
Annual Report Form

Return to:

SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

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

ACCESS POINT FAMILY SERVICES INC.
427 N MAIN STE A
POCATELLO, ID 83204

2. Registered Agent and Office **NO PO BOX**

PETE MOLINO
427 N MAIN STE A
POCATELLO, ID 83204

**NO FILING FEE IF
RECEIVED BY DUE DATE**

3. New Registered Agent Signature

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

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	Pete Molino	427 N. main ste A	Pocatello	ID	83204
Vice President	Holly Molino	1335 E 17th	Idaho Falls	ID	83404

5. Organized Under the Laws of:

IDAHO
C 134912

6.

Signature *Holly Molino*

Date 8/1/04

Name (Typed or Printed) *Holly Molino*

Title *VICE-president*

Issued 05/03/2004

Do Not Tape or Staple

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