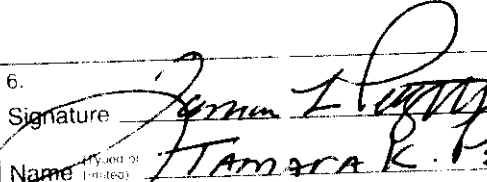


No. W 32511	Due no later than August 11, 2005 Annual Report Form		2. Registered Agent and Office NO PO BOX TAMARA PETTINGILL 2677 E 17TH ST # 400 IDAHO FALLS, ID 83406												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable PETTINGILL COUNSELING SERVICES, LLC 2677 E 17TH ST # 400 IDAHO FALLS, ID 83406		3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Owner</td> <td>Tamara Pettingill</td> <td>2677 E. 17th St Suite 400</td> <td>Idaho Falls,</td> <td>ID</td> <td>83406</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Owner	Tamara Pettingill	2677 E. 17th St Suite 400	Idaho Falls,	ID	83406
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
Owner	Tamara Pettingill	2677 E. 17th St Suite 400	Idaho Falls,	ID	83406										
5. Organized Under the Laws of: IDAHO W 32511		6.  Signature _____ Date 6/7/05 Name Tamara K. Pettingill Title Owner 20r 508000632													

Do Not Tape or Staple