

No. C 113022

Due no later than December 31, 2008
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

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

IDAHO ALCOHOL/DRUG COUNSELOR CERTIF
CONNIE SEARLES
270 N 27TH ST STE B
BOISE, ID 83702CONNIE SEARLES
2419 WEST STATE ST #5
BOISE, ID 83702NO FILING FEE IF
RECEIVED BY DUE DATE3. New Registered Agent Signature

4.

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

Office held	Name	Street or P.O. Address	City	State	Zip
Pres.	MARY EKLUND	530 W 24th St	Burley	ID	83318
Vice Pres.	JOHN SMITH	P.O. Box 742	Carnegieville	ID	83530
Secy Treas	Pat Naeson	5440 Franklin Rd #101	Boise	ID	83705

5. Organized Under the Laws of:

IDAHO
C 113022

6.

Signature

Name (Typed or Printed)

Suzanne Johnson
Suzanne Johnson

Date

10/10/08

Title

Executive Asst.

Issued 10/01/2008

Do Not Tape or Staple

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