

|                                                                                                                                                        |                  |                                                                                                                                                                                              |          |                                                                         |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|-------------------------------------------------------------------------|---------|------------------|--|
| No. <b>C 176528</b>                                                                                                                                    |                  | <b>Due no later than Jan 31, 2015</b>                                                                                                                                                        |          | 2. Registered Agent and Address <b>(NO PO BOX)</b>                      |         |                  |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                  | <b>1. Mailing Address: Correct in this box if needed.</b><br>ABUNDANCE BEHAVIORAL HEALTH SERVICES, INC.<br>BEVERLY PHILLIPS<br>524 E CLEVELAND BLVD STE 230<br>CALDWELL ID 83605-4080<br>USA |          | BEVERLY PHILLIPS<br>524 E CLEVELAND BLVD STE 230<br>CALDWELL 83605-4080 |         |                  |  |
|                                                                                                                                                        |                  |                                                                                                                                                                                              |          | 3. <u>New</u> Registered Agent Signature:*                              |         |                  |  |
| 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                                                                                                                                              | BEVERLY PHILLIPS | 524 E CLEVELAND BLVD STE 230                                                                                                                                                                 | CALDWELL | ID                                                                      | USA     | 83605-4080       |  |
| 5. Organized Under the Laws of:                                                                                                                        |                  | 6. Annual Report must be signed.*                                                                                                                                                            |          |                                                                         |         |                  |  |
| <b>ID<br/>C 176528</b>                                                                                                                                 |                  | Signature: Beverly Phillips                                                                                                                                                                  |          |                                                                         |         | Date: 02/18/2015 |  |
|                                                                                                                                                        |                  | Name (type or print): Beverly Phillips                                                                                                                                                       |          |                                                                         |         | Title: President |  |
| Processed 02/18/2015                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.                                                                                                                    |          |                                                                         |         |                  |  |