

No. C 143058		Due no later than Mar 31, 2017 Annual Report Form		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		1. Mailing Address: Correct in this box if needed. TUELLER COUNSELING, INC. THOMAS E. TUELLER 2275 WEST BROADWAY SUITE G IDAHO FALLS ID 83402		JEFFERY W BANKS 330 SHOUP AVENUE SUITE 201 IDAHO FALLS ID 83402			
						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	MICHELLE TUELLER	883 E 1300 N	SHELLEY	ID	USA	83274	
5. Organized Under the Laws of: ID C 143058		6. Annual Report must be signed.* Signature: Thomas Tueller Name (type or print): Thomas Tueller Date: 02/16/2017 Title: Owner, Clinical Director					
Processed 02/16/2017 * Electronically provided signatures are accepted as original signatures.							