

No. C 191582		Due no later than Jun 30, 2012 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. MEADOWLAND THERAPY, INC. 1033 W QUINN RD POCATELLO ID 83202		RICHARD LEMON 1033 W QUINN RD POCATELLO ID 83202			
						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	
VICE PRESIDENT	TROY BELL	1033 W QUINN	POCATELLO	ID	USA	83202	
PRESIDENT	RICHARD LEMON	1033 W QUINN RD	POCATELLO	ID	USA	83202	
5. Organized Under the Laws of: DE C 191582		6. Annual Report must be signed.* Signature: Troy Bell Name (type or print): Troy Bell Date: 04/24/2012 Title: Vp					
Processed 04/24/2012 * Electronically provided signatures are accepted as original signatures.							