

No. <b>C 198645</b>		<b>Due no later than Jun 30, 2018</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  SHARING BEAR COUNSELING PC AARON L SCHAEERRER PO BOX 52236 IDAHO FALLS ID 83405 USA		AARON SCHAEERRER 2267 TETON PLAZA IDAHO FALLS ID 83404			
						3. <u>New</u> Registered Agent Signature:*	
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held DIRECTOR	Name AARON L. SCHAEERRER	Street or PO Address 2267 TETON PLAZA		City IDAHO FALLS	State ID	Country USA	Postal Code 83404
5. Organized Under the Laws of:  <b>ID C 198645</b>		6. Annual Report must be signed.*  Signature: Aaron Schaerrer Name (type or print): Aaron Schaerrer  Date: 08/13/2018 Title: LCSW					
Processed 08/13/2018      * Electronically provided signatures are accepted as original signatures.							