

No. C 91800	Idaho Corporation Annual Report Form	2. Registered Agent and Office
Return To	Due No Later Than November 1,	
Secretary of State Room 203, Statehouse Boise, ID 83720	1. Mailing Address — Please Correct	DR. MILTON MACK 4600 BROOKSIDE LN BOISE ID 83703
REINSTATEMENT FEE 40.00 if received before 12/31/96	AERIE ADDICTIONS RECOVERY CENTER, INC. (THE) DR. MILTON MACK 9600 BROOKSIDE LN BOISE ID 83703	3. Incorporated Under The Laws of IDAHO C 91700

4. Names and Addresses of Officers and Directors

	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President:	Milton H Mack	4600 Brookside Ln	Boise	IDAHO	83703
Secretary:	Helen J Mack	9600 Brookside Ln	Boise	IDAHO	83703
Directors:	David Mack	7975 Mojave Dr	Boise	IDAHO	83709

5. Nature of Business <i>Dr/alc. treatment facility</i>	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <i>Milton H Mack</i> Date <i>12-18-96</i> Name (Typed or Printed) _____ Title _____
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SECRETARY OF STATE
 STATE OF IDAHO

SECRETARY OF STATE
 STATE OF IDAHO

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