No. C 112372		Du	2. Registered Agent and Address (NO PO BOX)					
Return to:		Annual Report Form		KEVIN RHIN	KEVIN RHINEHART			
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. CENTER FOR CHRISTIAN THERAPY, INC. KEVIN P RHINEHART 660 E FRANKLIN ROAD, SUITE 260 MERIDIAN ID 83642-2914 USA		660 E FRANKLIN ROAD, SUITE 260 MERIDIAN ID 83642-2914 3. New Registered Agent Signature:*				
4. Corporations: Enter Names a	nd Busin	ess Addresses of	President, Secretary, and Directors. Treasure	er (optional).				
Office Held Nam	ne		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT KEV	IN P RH	HINEHART	660 E FRANKLIN ROAD, SUITE 260	MERIDIAN	ID	USA	83642-2914	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Ke		Date: 08/20/2012				
C 112372		Name (type or	Title: President					
Processed 08/20/2012	* Electronically provided signatures are accepted as original signatures.							