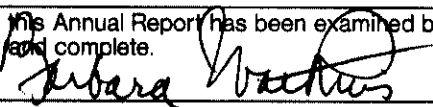


No. 052143	Idaho Corporation Annual Report Form Due No Later Than November 1, 1987	2. Registered Agent and Office MARK L. CLARK 1303 12TH AVE. RO., BOX NAMPA, IDAHO 83651																														
Return To Secretary of State Room 203, Statehouse Boise, ID 83720	1. Mailing Address — Please Correct 052143 MENTAL HEALTH ASSOCIATION OF CAN BARBARA WATKINS ROUTE 7, BOX 7023 NAMPA, IDAHO 83651	3. Incorporated Under The Laws of ENTERED STATE OF IDAHO NOV 3 1987																														
RECEIVED SEC. OF STATE NOV 9 23 AM '87 <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%; text-align: left;">4. Names and Addresses of Officers and Directors</th> <th style="width: 20%; text-align: center;"><u>Name</u></th> <th style="width: 30%; text-align: center;"><u>Street or P.O. Address</u></th> <th style="width: 10%; text-align: center;"><u>City</u></th> <th style="width: 10%; text-align: center;"><u>State</u></th> <th style="width: 10%; text-align: center;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>SHIRLEY BLOOD</td> <td>RT10 FRIDELANE</td> <td>CALDWELL</td> <td>ID</td> <td>83651</td> </tr> <tr> <td>Secretary:</td> <td>BARBARA WATKINS</td> <td>RT7 BOX 7023</td> <td>NAMPA</td> <td>ID</td> <td>83651</td> </tr> <tr> <td>Directors:</td> <td>JOAN HILL</td> <td>1026 SAGE CREEK</td> <td>NAMPA</td> <td>ID</td> <td>83651</td> </tr> <tr> <td></td> <td>KERI CHRISTIAN</td> <td>4112 SUNNYRIDGE</td> <td>NAMPA</td> <td>ID</td> <td>83651</td> </tr> </tbody> </table>			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:	SHIRLEY BLOOD	RT10 FRIDELANE	CALDWELL	ID	83651	Secretary:	BARBARA WATKINS	RT7 BOX 7023	NAMPA	ID	83651	Directors:	JOAN HILL	1026 SAGE CREEK	NAMPA	ID	83651		KERI CHRISTIAN	4112 SUNNYRIDGE	NAMPA	ID	83651
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5. Nature of Business NON-PROFIT MENTAL HEALTH ACTIVITIES	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  Name (Typed or Printed) BARBARA WATKINS Date 10/30/87 Title Secretary																															