

No. 100	Idaho Limited Liability Company Annual Report Form	2. Registered Agent and Office NOT A P.O. BOX
Return To REINSTATEMENT Secretary of State 700 W. Jefferson P.O. Box 83720 Boise, ID 83720-0080 ** FINANCE STATE NO FEE REQUIRED	Due No Later Than November 30, 1995 1. Mailing Address -- Please Correct if Not Correct SOUTHEAST IDAHO DAY TREATMENT C J KENT MUELLER, M.D. 151 N 3RD AVE #108 2043 E. Center POCA TELLO ID 83201	J KENT MUELLER, M.D. 151 N 3RD AVE #108 POCA TELLO ID 83201 3. Organized Under The Laws of ID NO: 100

4. Names and Addresses of ☐ Managers or ☐ Members (check one)					MUST BE PRINTED OR TYPED	
Name	Street or P.O. Address	City	State	Zip		
J. Kent Mueller, M.D.	2043 E. Center	Pocatello	ID	83201		
Winslow Hunt, M.D.	640 Penhng	Pocatello	ID	83201		
5. Signature of the Current Registered Agent (if changed in block 2)		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.				
DEC 10 09 AM '95 SECRETARY OF STATE STATE OF IDAHO		Signature <u>R. C. Budge, Authorized Attorney</u> Date <u>12/8/95</u> Name (Typed or Printed) <u>R.C. Budge, Racine, Olson, Nye, Cooper & Budge</u> <u>P.O. Box 1391, Pocatello, ID. 83201 208-237-6642</u>				