

No. C 52538	Due no later than Dec 31, 2013 Annual Report Form	2. Registered Agent and Address (NO PO BOX)				
Return to: 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. WALKER CENTER FOR ALCOHOLISM AND DRUG ABUSE, INC. (THE) TONYA KAY BURG 605 11TH AVE E GOODING ID 83330 USA	DEBORAH THOMAS 605 11TH AVE E GOODING ID 83330 3. <u>New</u> Registered Agent Signature:*				
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
DIRECTOR	KATE STUART	160 LARKSPUR	TWIN FALLS	ID	USA	83301
DIRECTOR	PHIL BECKER	PO BOX 456	GOODING	ID	USA	83330
PRESIDENT	DOUGLAS O SMITH	1850 ELMWOOD RD.	GOODING	ID	USA	83330
DIRECTOR	MARY BELLE ANDERSON	1928 SOUTH 2100 EAST	GOODING	ID	USA	83330
DIRECTOR	DONNA PENCE	1960 US HWY 26	GOODING	ID	USA	83330
5. Organized Under the Laws of: ID C 52538	6. Annual Report must be signed.* Signature: Tonya K. Burg Name (type or print): Tonya K. Burg		Date: 10/21/2013 Title: Human Resources Director			
Processed 10/21/2013		* Electronically provided signatures are accepted as original signatures.				