

REINSTATEMENT

No. C 56642	Annual Report Form ADMIN DISSOLVED 01/05/2001		2. Registered Agent and Office NOT A P.O. BOX																									
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00	1. Mailing Address - Correct in this box, if applicable GEMHAVEN PSYCHOLOGICAL, INC. P O BOX 5795 BOISE, ID 83705		LYNN WADE 2300 W BOISE AVE BOISE, ID 83705 3. New registered agent signature <i>Lynn Wade</i>																									
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)																												
<table border="0"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Kathi French</td> <td>9624 E. Kuna Rd</td> <td>Kuna, Id</td> <td></td> <td>83634</td> </tr> <tr> <td>V. President</td> <td>Pauline Stevens</td> <td>110 N. Ten Mile</td> <td>Mendon, Id</td> <td></td> <td>83642</td> </tr> <tr> <td>Secretary</td> <td>Cheryl Cowles</td> <td>3474 Rugby Way</td> <td>Boise, Id</td> <td></td> <td>83709</td> </tr> </tbody> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President	Kathi French	9624 E. Kuna Rd	Kuna, Id		83634	V. President	Pauline Stevens	110 N. Ten Mile	Mendon, Id		83642	Secretary	Cheryl Cowles	3474 Rugby Way	Boise, Id		83709
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5. Organized under the laws of: IDAHO C 56642		6. Signature <u>Lynn Wade</u> Date <u>9/18/01</u> Name (Typed or Printed) <u>LYNN WADE</u> Title <u>Executive Director</u>																										

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