No. W 7845		30.A40.000 00.000 00.000 00.000 00.000 00.000 00.000 00.000 00.000 00.000 00.000 00.000 00.000 00.000 00.000 0		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. BOISE VALLEY COUNSELING CENTER, L.L.C. BARRY A WATTS 5070 N LEATHER PL		5070 N LEA BOISE ID	BARRY A WATTS 5070 N LEATHER PL BOISE ID 83713 0000 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
200		nes and Addresse	s of at least one Member or Manager.					
Office Held Na	me		Street or PO Address	City	State	Country	Postal Code	
MANAGER BARRY A WATTS			3852 N EAGLE ROAD SUITE 168	BOISE	ID	USA	83713	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
IDA HO W 7845		Signature: BA		Date: 12/31/2005				
		Name (type or		Title: MANAGER				
Processed 12/31/2005 * Electronically provided signatures are accepted as original signatures.								