

No. W 72466		Due no later than Mar 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		1. Mailing Address: Correct in this box if needed. PROGRESSIVE THERAPY SERVICES, PLLC AMANDA FAYE ECK 2175 N 45TH E IDAHO FALLS ID 83401 USA		AMANDA FAYE ECK 2175 N 45TH E IDAHO FALLS ID 83401			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	AMANDA FAYE ECK	2175 N 45TH E	IDAHO FALLS	ID	USA	83401	
MEMBER	CODY ECK	2175 N. 45TH E.	IDAHO FALLS	ID	USA	83401	
5. Organized Under the Laws of: ID W 72466		6. Annual Report must be signed.* Signature: Amanda Faye Eck Name (type or print): Amanda Faye Eck					
		Date: 03/04/2013 Title: President					
Processed 03/04/2013 * Electronically provided signatures are accepted as original signatures.							