No. W 134295		Due no later than Feb 28, 2015		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. GERIATRIC CARE CONSULTANTS, PLLC TAMARA ANN AVELLA 12320 N UPPER RIDGE PLACE BOISE ID 83714		205 N 10TI BOISE 8	ALLAN R BOSCH 205 N 10TH ST 4TH FL BOISE 83702 3. New Registered Agent Signature:*			
NO FILING RECEIVED BY I	DUE DATE	ames and Addresse	s of at least one Member or Manager.					
Office Held	Name	arries and radicesse	Street or PO Address	City	State	Country	Postal Code	
MANAGER	TAMARA A	NN AVELLA	12320 N UPPER RIDGE PLACE	BOISE	ID	USA	83714	
5. Organized Under the Laws of:		6. Annual Report						
ID W 134295		Signature: Tamara Avella, LCSW			Date: 01/13/2015			
		Name (type or		Title: Social Worker				
Processed 01/13/2015		* Electronically pr	ovided signatures are accepted as original	signatures.				