No. <b>W 68749</b>		Due no later than Nov 30, 2010		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			MARY BECK 935 CENTENNIAL PL POCATELLO ID 83201			
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.  COORDINATED CARE SERVICES, LLC  MARY BECK  935 CENTENNIAL PL  POCATELLO ID 83201  USA						
				POCATELLO				
				3. <u>New</u> Registe	3. New Registered Agent Signature:*			
4. Limited Liability Con	npanies: Enter Na	mes and Addres	sses of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
Manager Manager	MARY BECK MELINDA JAHSMAN		935 CENTENNIAL PL 149 S 17TH	POCATELLO POCATELLO	ID ID	USA USA	83201 83201	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 68749		Signature: Mary Beck		Da	Date: 10/14/2010			
		Name (type or print): Mary Beck		Tit	Title: Administrator			
Processed 10/14/2010	1	* Electronically	provided signatures are accepted as origina	al signatures.				