No. C 178999		Due no later than Jun 30, 2018		2. Registered A	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. ACE THERAPY, CHTD. GAYLE N. MCCAMPBELL 3 NICOLLE LANE SALMON ID 83467		3 NICOLLE L SALMON ID	GAYLE MCCAMPBELL 3 NICOLLE LANE SALMON ID 83467 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
700		ess Addresses of P	resident, Secretary, and Directors. Trea Street or PO Address		State	Country	Postal Code	
SECRETARY [Name DAVID M. MCCAMPBELL GAYLE N MCCAMPBELL		3 NICOLLE LANE 3 NICOLLE LANE	City SALMON SALMON	ID ID	Country USA USA	83467-8346 83467-8346	
5. Organized Under the Laws of: ID C 178999		6. Annual Report must be signed.* Signature: Gayle N. McCampbell Name (type or print): Gayle N. McCampbell			Date: 05/07/2018 Title: President			
Processed 05/07/2018	* Electronically provided signatures are accepted as original signatures.							