

No. C 175103		Due no later than Sep 30, 2012		2. Registered Agent and Address (NO PO BOX)		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. MUSTARD TREE COMMUNITY WELLNESS CENTER, INC. JONIE BENSON 570 SHOUP AVE. W TWIN FALLS ID 83301 USA		JONIE BENSON 570 SHOUP AVE W TWIN FALLS ID 83301		
				3. <u>New</u> Registered Agent Signature:*		
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
TREASURER	JUDY FOLLOW	2188 ADDISON	TWIN FALLS	ID	USA	83301
SECRETARY	DEB ANNEST	285 FRAZIER CT	TWIN FALLS	ID	USA	83301
DIRECTOR	DAVE SNYDER	3145 BOEHM ESTATE DR	TWIN FALLS	ID	USA	83301
DIRECTOR	SUSAN BAISCH	1194 SUNBURST	TWIN FALLS	ID	USA	83301
PRESIDENT	DAVID MCCLUSKY MD	660 SHOSHONE ST	TWIN FALLS	ID	USA	83301
DIRECTOR	SANDRA SEXTON	1021 STARLIGHT LOOP	TWIN FALLS	ID	USA	83301
DIRECTOR	BONNIE STEFFENS	570 SHOUP AVE. W.	TWIN FALLS	ID	USA	83301
DIRECTOR	LISA BURGETT	3351 LONGBOW DR.	TWIN FALLS	ID	USA	83301
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
ID C 175103		Signature: Jonie Benson			Date: 07/24/2012	
		Name (type or print): Jonie Benson			Title: Administrator	
Processed 07/24/2012		* Electronically provided signatures are accepted as original signatures.				