No. <b>C 128172</b>		Due no later than Mar 31, 2011	2. Registered Ag	2. Registered Agent and Address (NO PO BOX)  JOHN W HICKS  4865 KIM DRIVE POCATELLO ID 83201  3. New Registered Agent Signature:*			
Return to:		Annual Report Form					
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.  LIFE & HEALTH BENEFITS, INC.  JOHN W HICKS  4865 KIM DRIVE  PO BOX 6231	POCATELLO				
		POCATELLO ID 83201					
4. Corporations: En	ter Names and Bus	iness Addresses of President, Secretary, and Directors. Treasur	rer (optional).				
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	JOHN W F	TICKS P.O. BOX 6231	POCATELLO	ID	USA	83205	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID C 128172		Signature: Jeanette Stumpp	Da	Date: 01/19/2011			
		Name (type or print): Jeanette Stumpp	Ti	Title: Office Manager			
Processed 01/19/20	)11	* Electronically provided signatures are accepted as original s	signatures.				