

No. C 177787		Due no later than Mar 31, 2011 Annual Report Form		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		1. Mailing Address: Correct in this box if needed. TOUCH OF HOPE FROM THETAHEALING INC KATIE R. LAMB 1420 E. 17TH STREET SUITE E IDAHO FALLS ID 83404 USA		KATIE LAMB 1420 E. 17TH STREET SUITE E IDAHO FALLS ID 83404			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors, Treasurer (optional).						3. <u>New</u> Registered Agent Signature:*	
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	KATIE R LAMB	182 N. 3950 E.	RIGBY	ID	USA	83442-5744	
5. Organized Under the Laws of: ID C 177787		6. Annual Report must be signed.* Signature: Katie Lamb Name (type or print): Katie Lamb					
		Date: 01/20/2011 Title: President					
Processed 01/20/2011 * Electronically provided signatures are accepted as original signatures.							