No. C 185557		Due no later than Dec 31, 2012		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			ROBERT V DELOACH			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. JLR GENERATIONS HEALTH MANAGEMENT, INC. ROBERT V DELOACH 275 S 5TH		LOWER LEVE	275 S 5TH LOWER LEVEL POCATELLO ID 83201			
NO FILING FEE IF RECEIVED BY DUE DATE		LOWER LEVEL POCATELLO ID 83201 USA		3. <u>New</u> Register	3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).								
Office Held N	Name		Street or PO Address	City	State	Country	Postal Code	
TREASURER R	JIM EVERTON ROBERT V DELOACH LEWIS CHANDLER		2438 HISKEY ST 525 POOLE AVE 4910 JOHNNY CREEK	POCATELLO POCATELLO POCATELLO	ID ID ID	USA USA USA	83201 83201 83204	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 185557		Signature: Jim Everton Name (type or print): Jim Everton			Date: 10/24/2012 Title: President			
Processed 10/24/2012		* Electronically provided signatures are accepted as original signatures.						