No. W 70564		Due no later than Jan 31, 2009	2. Registered Agent and Address (NO PO BOX) DWIGHT DICKEY 1212 BOROS RD NEW MEADOWS ID 83654 3. New Registered Agent Signature:*				
Return to:		Annual Report Form					
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. CORBY DICKEY - HEALTH CAREERS, LLC. CORBY DICKEY PO BOX 406 NEW MEADOWS ID 83654					
NO FILING FEE IF RECEIVED BY DUE DATE		USA					
4. Limited Liability Compa	anies: Enter Nai	mes and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	CORBY DICK	EY PO BOX 406	NEW MEADOWS	ID	USA	83654	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 70564		Signature: Corby Dickey	Date: 12/10/2008				
		Name (type or print): Corby Dickey	Title: Manager				
Processed 12/10/2008	Processed 12/10/2008 * Electronically provided signatures are accepted as original signatures.						