No. <b>C 169742</b>		Due no later than Nov 30, 2010			2. Registered Agent and Address (NO PO BOX)			
Return to:	Ann	Annual Report Form		ROBERT TIMOTHY THURMAN MD				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address ONE WORLD MEDIC ZABRINA Y THURM 933 S UTAH		ed.	933 S UTAH IDAHO FALLS ID 83404				
NO FILING FEE IF RECEIVED BY DUE DATE	IDAHO FALLS ID 8	3402		3. <u>New</u> Registered Agent Signature:*				
4. Corporations: Enter Names and E	usiness Addresses of Presid	lent, Secretary, and Directors. Tre	easurer (	optional).				
Office Held Name		Street or PO Address		City	State	Country	Postal Code	
DIRECTOR ROBERT	OR ROBERT TIMOTHY THURMAN MD			IDAHO FALLS IDAHO FALLS IDAHO FALLS	ID ID	USA USA USA	83402 83404 83404	
5. Organized Under the Laws of: 6. Annual Report must		t be signed.*						
ID C 169742	Signature: Zabrina Name (type or print	Thurman :): Zabrina Thurman		Date: 10/21/2010 Title: PA-C/Secretary				
Processed 10/21/2010	* Electronically provide	* Electronically provided signatures are accepted as original signatures.						