

No. W 28793	Due no later than February 29, 2008 Annual Report Form	2. Registered Agent and Office NO PO BOX CYNTHIA R CULP 951 E PLAZA DR STE 110 EAGLE, ID 83616
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable ROCKY MOUNTAIN HEALTH AND WELLNESS CYNTHIA R CULP 951 E PLAZA DR STE 110 EAGLE, ID 83616	3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Managers.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
MEMBER	Cynthia R. Culp	1199 N. Macaite Way	Eagle	ID	83616
MEMBER	William J Lvers	1199 N. Macaite Way	Eagle	ID	83616

5. Organized Under the Laws of: IDAHO W 28793	6. Signature <u>Cynth^R Culp</u> Date <u>1-9-08</u> Name (Typed or Printed) <u>Cynthia R. Culp</u> Title <u>Member</u>
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