

No. W 21204		Due no later than Oct 31, 2010 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		1. Mailing Address: Correct in this box if needed. HEALTH AND WELLNESS CENTER OF IDAHO, PLLC SUSAN M INGLE 2001 S WOODRUFF #5 IDAHO FALLS ID 83404 USA		ERIC W PERTTULA 3675 COBBLESTONE LN IDAHO FALLS ID 83404			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name ERIC W PERTTULA MD	Street or PO Address 3675 COBBLESTONE LANE		City IDAHO FALLS	State ID	Country USA	Postal Code 83404
5. Organized Under the Laws of: ID W 21204		6. Annual Report must be signed.* Signature: Eric Perttula Name (type or print): Eric Perttula Date: 08/08/2010 Title: Manager					
Processed 08/08/2010 * Electronically provided signatures are accepted as original signatures.							