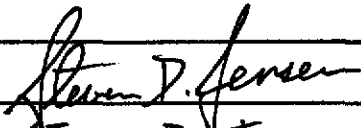


No. C 176755	Due no later than January 31, 2009 Annual Report Form	2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address - Correct in this box, if applicable S. JENSEN WELLNESS PROJECT INC 686 W KENTUCKY AVE HAYDEN, ID 83835	STEVEN D JENSEN 686 W KENTUCKY AVE HAYDEN, ID 83835
NO FILING FEE IF RECEIVED BY DUE DATE		3. <u>New</u> Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
DIRECTOR -	STEVEN D. JENSEN	686 Kentucky ave,	Hayden,	ID	83835
ASSISTANT DIRECTOR -	WANDA P. JENSEN	- SAME ADDRESS ABOVE			
SECRETARY -	JULIA A. BRYANT	601 E. Selma,	Post Falls,	ID	83854

5. Organized Under the Laws of: IDAHO C 176755	6. Signature  Name (Typed or Printed) STEVEN D. JENSEN	Date 1-28-09 Title DIRECTOR
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