

No. C 159989		Due no later than Apr 30, 2007 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 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. BACK TO HEALTH CHIROPRACTIC CLINIC, INC. DAVID G BOOTH 60 SO 2ND W REXBURG ID 83440		DAVID G BOOTH 60 SO 2ND W REXBURG ID 83440			
						3. <u>New</u> Registered Agent Signature:*	
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors, Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	DAVID G BOOTH	2973 S. 2000 W.	REXBURG	ID	USA	83440	
SECRETARY	GINA M BOOTH	2973 S. 2000 W.	REXBURG	ID	USA	83440	
5. Organized Under the Laws of: IDAHO C 159989		6. Annual Report must be signed.* Signature: David George Booth Name (type or print): David George Booth Date: 05/10/2007 Title: Owner					
Processed 05/10/2007		* Electronically provided signatures are accepted as original signatures.					