No. C 163531		Due no later than Nov 30, 2009	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	SUN VALL HEATHER PO BOX 4	Annual Report Form 1. Mailing Address: Correct in this box if needed. SUN VALLEY WELLNESS INSTITUTE, INC. HEATHER L LAMONICA DECKARD PO BOX 4174 KETCHUM ID 83340-4174		GENE C DANIELS 323 LEWIS ST STE I KETCHUM ID 83340 3. New Registered Agent Signature:*			
4. Corporations: Enter Names and E	usiness Addresse	s of President, Secretary, and Directors. Treasurer	(optional).				
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR CHERYL THOMAS		PO BOX 790	KETCHUM	ID	USA	83340	
PRESIDENT NICK MARICICH		PO BOX 420	KETCHUM	ID	USA	83340	
DIRECTOR DOLORA	DEAL	PO BOX 42	SUN VALLEY	ID	USA	83353	
DIRECTOR PAM JO	VAS	114 WILLOW RD	HAILEY	ID	USA	83333	
5. Organized Under the Laws of: 6. Annual Re		eport must be signed.*					
ID Sig		Signature: Heather LaMonica Deckard Date: 12/17/2009					
C 163531	Name (ty	Name (type or print): Heather LaMonica Deckard			Title: Event Director		
Processed 12/17/2009	* Electronica	lly provided signatures are accepted as original sig	natures.				