

No. W 48787

Due no later than March 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

SPARKS INSTITUTE OF HEALTH, LLC
4344 N NINES RIDGE LANE
BOISE, ID 83702DR DAVID SPARKS
4344 N NINES RIDGE LANE
BOISE, ID 83702NO FILING FEE IF
RECEIVED BY DUE DATE3. New Registered Agent Signature

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

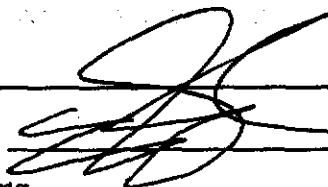
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
PRES/CEO	DAVID SPARKS	4344 N. NINES RIDGE LN	BOISE	ID	83702
SECRETARY	JUNE SPARKS	4344 N. NINES RIDGE LN	BOISE	ID	83702

5. Organized Under the Laws of:

IDAHO
W 48787

6.

Signature



Date

1-20-09

Name (Typed or Printed)

Title

Issued 01/05/2009

Do Not Tape or Staple

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