

No. W 27405

Due no later than December 31, 2007
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**

**NO FILING FEE IF
RECEIVED BY DUE DATE**

**WELLSPRING WELLNESS CENTER, LLC
5128 SHALECREST CT
BOISE, ID 83703**

STEVEN E ALKIRE
205 N TENTH ST STE 300
BOISE, ID 83702

BOISE, ID 83703
13001 N. Windy Meadow Ave
Boise ID 83714

3. New Registered Agent Signature

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

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	Leanne Parker	13001 N Windy Meadow Ave	Boise	Id	83714
Secretary	Jay Parker	13001 N. Windy Meadow Ave	Boise	Id	83714

5. Organized Under the Laws of:

IDAHO
W 27405

6. Signature

Name _____

Date 10/17/09

Title Secretary

Issued 10/01/2007

Do Not Tape or Staple

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