

No. <b>C 165598</b>		<b>Due no later than Mar 31, 2009</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b> TWIN FALLS HEALTH INITIATIVES TRUST, LTD. PO BOX 525 TWIN FALLS ID 83303-0525		THOMAS M ROBERTSON 156 2ND AVE W TWIN FALLS ID 83301		
				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
DIRECTOR	TERRY MCCURDY	393 EASTLAND DR. SO.	TWIN FALLS	ID	USA	83301
DIRECTOR	JAY DODDS	383 SHOSHONE STREET N.	TWIN FALLS	ID	USA	83301
DIRECTOR	JAMIE KELLEY-KINYON	PO BOX 1238	TWIN FALLS	ID	USA	83303-1238
PRESIDENT	CURTIS EATON	PO BOX 1238	TWIN FALLS	ID	USA	83303-1238
TREASURER	ROBERT VALENTINE	PO BOX 1074	TWIN FALLS	ID	USA	83303-1074
SECRETARY	PATTY KLEINKOPF	794 EASTLAND DR.	TWIN FALLS	ID	USA	83301
DIRECTOR	RENE LEBLANC	1020 WASHINGTON ST. N.	TWIN FALLS	ID	USA	83301
DIRECTOR	TOM MIKESELL	PO BOX 126	TWIN FALLS	ID	USA	83303-0126
5. Organized Under the Laws of:  <b>ID C 165598</b>		6. Annual Report must be signed.* Signature: Curtis Eaton Name (type or print): Curtis Eaton  Date: 03/06/2009 Title: President				
Processed 03/06/2009		* Electronically provided signatures are accepted as original signatures.				