No. W 7781	Due no later than Jan 31, 2006	2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 700 WEST JEFFEF SON PO BOX 83720 BOISE, ID 83720-0:)80  NO FILING FEE IF RECEIVED BY DUE DATE	Annual Report Form  1. Mailing Address - Correct in this box, if applicable  GROUP BENEFITS SERVICES, L.L.C. REX E MILLER  490 MEMORIAL DR 104  IDAHO FALLS, ID 83402	REX E MILLER 490 MEMORIAL DR 104  IDAHO FALLS, ID 83402  3. New Registered Agent Signature
Limited Liability Compan Office held Name MEMBER FEX E. Ma	ies: Enter Names and Addresses of Members.  Street or P.O. Address  City  LLER 490 MEMBRIAL DR. STE 184 IDE	y <u>State</u> <u>Zip</u> WHO FALLS ID 83403
5. Organized Under the Laws of: IDAHO W 7781	Signature  Name (Typed or REX E M.LLER	Date 1/30/06 Title MEMBER
\	Name Printed)	