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| No. W 44093 | Due no later than Oct 31, 2006 Annual Report Form | | 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 | 1. Mailing Address: Correct in this box if needed. RELIEF WORKERS MASSAGE THERAPY, P.L.L.C PAUL W DAUGHARTY 110 E WALLACE AVE COEUR D ALENE ID 83814 | | PAUL W DAUGHARTY 110 E WALLACE AVE COEUR D ALENE ID 83814 | | | |
| | | | 3. <u>New</u> Registered Agent Signature:* | | | |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager. | | | | | | |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code |
| MEMBER | LAURA MORRIS | PO BOX 1239 | COEUR D ALENE | ID | | 83816-1239 |
| 5. Organized Under the Laws of: IDAHO W 44093 | | 6. Annual Report must be signed.* Signature: Paul W. Daugharty Name (type or print): Paul W. Daugharty Date: 08/07/2006 Title: Registered Agent | | | | |
| Processed 08/07/2006 | | * Electronically provided signatures are accepted as original signatures. | | | | |