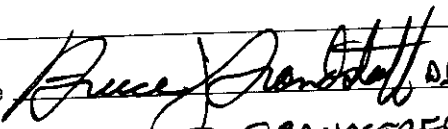


No. C 152659	Due no later than January 31, 2006 Annual Report Form		2. Registered Agent and Office NO PO BOX												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable CHIROPRACTIC HEALTH STRATEGIES P.A. 7905 N MEADOWLARK WAY STE B COEUR D'ALENE, ID 83815		BRUCE J GRANDSTAFF D.C. 7905 N MEADOWLARK WAY STE B COEUR D'ALENE, ID 83815 3. <u>New</u> Registered Agent Signature												
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>DIRECTOR:</td> <td>BRUCE J. GRANDSTAFF</td> <td>7905 N. MEADOWLARK WAY STE B.</td> <td>COA</td> <td>ID.</td> <td>83815</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	DIRECTOR:	BRUCE J. GRANDSTAFF	7905 N. MEADOWLARK WAY STE B.	COA	ID.	83815
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
DIRECTOR:	BRUCE J. GRANDSTAFF	7905 N. MEADOWLARK WAY STE B.	COA	ID.	83815										
5. Organized Under the Laws of: IDAHO C 152659	6. Signature  Date <u>1-25-06</u> Name (Typed or Printed) <u>BRUCE J. GRANDSTAFF</u> Title <u>DIRECTOR/owner.</u>														