No. W 62584		Due no later than May 31, 2010			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			ROSALIE JOHNSTON 950 IRONWOOD DR STE 2 COEUR D'ALENE ID 83814 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. WELLNESS ENHANCEMENT CENTER LLC ROALIE JOHNSTON 950 IRONWOOD DR STE 2 COEUR D'ALENE ID 83814						
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 ROSALIE JOI		HNSTON	950 IRONWOOD DR STE 2		COEUR D'ALENE	ID	USA	83814
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 62584		Signature: Rosalie Johnston			Date: 06/07/2010			
		Name (type or print): Rosalie Johnston			Title: Owner			
Processed 06/07/2010 * Electronically provided signatures are accepted as original signatures.								