

No. W 27405

**Due no later than December 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

1. Mailing Address - Correct in this box, if applicable

WELLSPRING WELLNESS CENTER, LLC  
5128 SHALECREST CT  
BOISE, ID 83703

STEVEN E ALKIRE  
205 N TENTH ST STE 300  
BOISE, ID 83702

**NO FILING FEE IF  
RECEIVED BY DUE DATE**

3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Managers.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
owner, pres.	Leann Parker	5128 Shalecrest	Boise	ID	83703

5. Organized Under the Laws of:

IDAHO  
W 27405

6.

Signature

*Leann Parker*

Date

10/13/06

Name

(Typed or Printed)

LEANN PARKER

Title

owner/pres.