No. C 157017		Due no later than Oct 31, 2012		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		DONALD R LAWRENZ 101 GRACE DR HAILEY ID 83333 3. New Registered Agent Signature:*			
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. WELLPOINT PROFESSIONAL PLAZA OWNERS ASSOCIATION INC. DON LAWRENZ PO BOX 4289 HAILEY ID 83333					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
DIRECTOR	RANCH	TIERNEY/BUSTERBACK	BOX 9385-STAR RT HC64	KETCHUM	ID	USA	83340
DIRECTOR	ELIZABETH (RANCH	C TIERNEY/BUSTERBACK	BOX 9385-STAR RT HC64	KETCHUM	ID	USA	83340
5. Organized Under the Laws of: 6. /		6. Annual Report must b	e signed.*				
ID C 157017		Signature: Don Lawrenz		Date: 09/15/2012			
		Name (type or print): Don Lawrenz		Title: Manager			
Processed 09/15/2012		* Electronically provided	signatures are accepted as original sign	natures.			