No. **C 91292**	**Due no later than Jan 31, 2010**	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**	**Annual Report Form** **1. Mailing Address: Correct in this box if needed.** WELL OF LIFE, INC. (THE) LELAND CALHOUN 3218 5TH STREET LEWISTON ID 83501 USA	LELAND CALHOUN 3218 5TH STREET LEWISTON ID 83501 3. New Registered Agent Signature:*

4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).

Office Held	Name	Street or PO Address	City	State	Country	Postal Code
TREASURER	MAREEN HOWELL	1304 29TH ST	LEWISTON	ID	USA	83501
DIRECTOR	VIN HOWELL	1304 29TH ST	LEWISTON	ID	USA	83501
SECRETARY	ELLEN M CALHOUN	3218 5TH ST	LEWISTON	ID	USA	83501
PRESIDENT	LELAND CALHOUN	3218 5TH ST	LEWISTON	ID	USA	83501

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **C 91292**	Signature: Leland Calhoun Name (type or print): Leland Calhoun	Date: 01/27/2010 Title: President

Processed 01/27/2010

* Electronically provided signatures are accepted as original signatures.