

No. C 174441		Due no later than Aug 31, 2009 Annual Report Form		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		1. Mailing Address: Correct in this box if needed. ELEMENTS OF WELLNESS, AQUATIC AND MANUAL THERAPY, INC. DAYNA K WILLBANKS 872 TROY HWY STE 170 MOSCOW ID 83843		DAYNA WILLBANKS 872 TROY HWY STE 170 MOSCOW ID 83843			
						3. <u>New</u> 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	
PRESIDENT	DAYNA K WILLBANKS	872 TROY HWY STE 170	MOSCOW	ID	USA	83843	
5. Organized Under the Laws of: ID C 174441		6. Annual Report must be signed.* Signature: Dayna K Willbanks Name (type or print): Dayna K Willbanks					
		Date: 06/22/2009 Title: President					
Processed 06/22/2009 * Electronically provided signatures are accepted as original signatures.							