

No. C 146984		Due no later than Jan 31, 2017 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. SUNNY HEIGHTS HEALING, INC. KATHRYN ANDERSON 1107 MIDWAY AVE AMMON ID 83406-8111 USA		ROBERT POULSEN 185 CAPITOL IDAHO FALLS ID 83402			
						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	KATHRYN ANDERSON	2965 SPRINGWOOD LANE	IDAHO FALLS	ID	USA	83404-8111	
DIRECTOR	KATHRYN ANDERSON	2965 SPRINGWOOD LANE	IDAHO FALLS	ID	USA	83404-8111	
TREASURER	ROBERT POULSEN	185 S. CAPITOL	IDAHO FALLS	ID	USA	83402-8111	
SECRETARY	KAREN MICHELLE CLARK	3219 SANDY DRIVE	IDAHO FALLS	ID	USA	83401	
5. Organized Under the Laws of: ID C 146984		6. Annual Report must be signed.* Signature: Kathryn Anderson Name (type or print): Kathryn Anderson					
		Date: 11/22/2016 Title: President					
Processed 11/22/2016 * Electronically provided signatures are accepted as original signatures.							