

No. W 26852		Due no later than Nov 30, 2006		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		JOLYN SEIBERT 166 W JEFFERSON BOISE ID 83702	
		1. Mailing Address: Correct in this box if needed. JOLYN SEIBERT, RD, CNSD, NUTRITION SPECIALISTS, PLLC JOLYN SEIBERT 166 W JEFFERSON BOISE ID 83702		3. <u>New</u> Registered Agent Signature:*	
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country Postal Code
MANAGER	JOLYN SEIBERT	166 W JEFFERSON	BOISE	ID	83702
5. Organized Under the Laws of:		6. Annual Report must be signed.*			
IDAHO W 26852		Signature: Jolyn Seibert		Date: 12/08/2006	
		Name (type or print): Jolyn Seibert		Title: Manager	
Processed 12/08/2006		* Electronically provided signatures are accepted as original signatures.			