

No. W 63209

Due no later than May 31, 2008

Annual Report Form

2. Registered Agent and Office NO PO BOX

NANCY C KNEELAND
418 N RIVER ST STE 21E
HAILEY, ID 83333

3. New Registered Agent Signature

Return to:
SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

DIAMONTE WELLNESS GROUP, LLC
418 N RIVER ST STE 21E
HAILEY, ID 83333

NO FILING FEE IF
RECEIVED BY DUE DATE

4. Limited Liability Companies: Enter Names and Addresses of Managers.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Clinical Director	Tyler Lohrke	211 E Crog	Hailey	ID	83333
Executive Director	Nancy C Kneeland	P.O. Box 6009			83354

5. Organized Under the Laws of:
IDAHO
W 63209

6.

Signature

Date

Mar 14, 2008

Name (Typed or Printed)

Nancy C Kneeland

Title

Exec Dir

Issued 03/03/2008

Do Not Tape or Staple

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