No. W 81735		Due no later than Feb 28, 2010	2. Registered Agent and Address (NO PO BOX) GREG HUFF 329 WOODRUFF AVE IDAHO FALLS ID 83401 3. New Registered Agent Signature:*			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. IDAHO HEALTH GUIDE LLC GREG HUFF 329 WOODRUFF AVE IDAHO FALLS ID 83401				
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar		nes and Addresses of at least one Member or Manager.				
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER GREG HUFF		329 S WOODRUFF AVE	IDAHO FALLS	ID	USA	83401
5. Organized Under the Laws of: ID W 81735		6. Annual Report must be signed.* Signature: Greg Huff Name (type or print): Greg Huff	Date: 12/17/2009 Title: Manager			
Processed 12/17/2009 * Electronically provided signatures are accepted as original signatures.						