No. W 53283

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

NO FILING FEE IF RECEIVED BY DUE DATE

Due no later than August 31, 2008
Annual Report Form

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

WELL SPRING CHIROPRACTIC P.L.L.C.
AMANDA MCNABB
1355 E CENTER ST
POCATELLO, ID 83201

2. Registered Agent and Office NO PO BOX

AMANDA MCNABB
1009 W QUINN RD
POCATELLO, ID 83202

3. New Registered Agent Signature

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

Office held	Name	Street or P.O. Address	City	State	Zip
Member	Amanda McNabb	1009 W Quinn Rd	Pocatello	ID	83202

5. Organized Under the Laws of:
IDAHO
W 53283

6.
Signature _____ Date 6-12-2008
Name (Typed or Printed) Amanda McNabb Title Member

Issued 06/02/2008

Do Not Tape or Staple

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