No. C 171776		Due no later than Mar 31, 2012		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		JAMES C HECHT			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. HEALING WATER INSTITUTE, INC. JAMES C HECHT PO BOX 369 SAGLE ID 83860		186 LOCH HAVEN SAGLE ID 83860 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA					
4. Corporations: Enter Na	mes and Busin	ess Addresses of Preside	nt, Secretary, and Directors. Treasurer	(optional).			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
DIRECTOR DIRECTOR	JAMES C HECHT IAIN TROUSDELL		PO BOX 369 EMERSON COLLEGE	SAGLE FOREST ROW	ID	USA ENGLAND	83860 RH185JX
DIRECTOR	COSTANTING) GIORGETTI	42 HAMMERWOOD RD ASHHURST WOOD	W SUSEX		GBR	RH193TG
5. Organized Under the Laws of:		6. Annual Report must I					
ID		Signature: James Hecht		Date: 01/29/2012			
C 171776		Name (type or print): James Hecht		Title: Director			
Processed 01/29/2012		* Electronically provided	signatures are accepted as original sig	natures.			