

No. C 179305		Due no later than Jul 31, 2013 Annual Report Form		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		1. Mailing Address: Correct in this box if needed. HEALTHNETUSA, INC. MELANIE A TETRICK 625 LAKELAND EAST DRIVE SUITE E FLOWOOD MS 39232		INCORP SERVICES, INC. 921 S ORCHARD ST STE G BOISE ID 83705 USA			
						3. <u>New</u> Registered Agent Signature:*	
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors, Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	RAYMOND A FOXWORTH	2470 FLOWOOD DR., SUITE 125	FLOWOOD	MS	USA	39232	
SECRETARY	JEAN FOXWORTH	2470 FLOWOOD DR., SUITE 125	FLOWOOD	MS	USA	39232	
5. Organized Under the Laws of: MS C 179305		6. Annual Report must be signed.* Signature: Raymond A. Foxworth Name (type or print): Raymond A. Foxworth Date: 07/22/2013 Title: President					
Processed 07/22/2013 * Electronically provided signatures are accepted as original signatures.							