No. W 90384		Due no later than Feb 28, 2013		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
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. LIFETIME WELLNESS CHIROPRACTIC PLLC BRENNAN WILLIAMS 2225 TETON PLAZA, STE. B IDAHO FALLS ID 83404		6348 N. 5TH IDAHO FALLS	BRENNAN WILLIAMS 6348 N. 5TH EAST IDAHO FALLS ID 83401 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar			ses of at least one Member or Manager.					
Office Held	Name	nes and Address	Street or PO Address	City	State	Country	Postal Code	
MEMBER MANAGER	MARY K WILLIAMS BRENNAN WILLIAMS		6348 N. 5TH EAST 6348 N. 5TH EAST	IDAHO FALLS IDAHO FALLS	ID ID	USA USA	83401 83401	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 90384		Signature: Brennan Williams Name (type or print): Brennan Williams			Date: 02/12/2013 Title: President			
Processed 02/12/2013 * Electronically provided signatures are accepted as original signatures.								