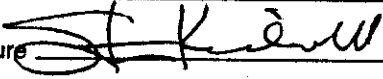


No. W 27087	Due no later than November 30, 2006 Annual Report Form		2. Registered Agent and Office NO PO BOX												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable IDAHO COMPLEMENTARY HEALTHCARE, LLC 2309 MOUNTAIN VIEW DR #170 BOISE, ID 83706		STAN KIDWELL 2309 MOUNTAIN VIEW DR # 170 BOISE, ID 83706 3. New Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="1"> <thead> <tr> <th data-bbox="123 359 327 390"><u>Office held</u></th> <th data-bbox="327 359 571 390"><u>Name</u></th> <th data-bbox="571 359 1020 390"><u>Street or P.O. Address</u></th> <th data-bbox="1020 359 1202 390"><u>City</u></th> <th data-bbox="1202 359 1334 390"><u>State</u></th> <th data-bbox="1334 359 1511 390"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td data-bbox="123 411 327 464">Manager</td> <td data-bbox="327 411 571 464">Stan Kidwell</td> <td data-bbox="571 411 1020 464">2309 Mountain View Dr #170</td> <td data-bbox="1020 411 1202 464">Boise</td> <td data-bbox="1202 411 1334 464">ID</td> <td data-bbox="1334 411 1511 464">83706</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Manager	Stan Kidwell	2309 Mountain View Dr #170	Boise	ID	83706
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
Manager	Stan Kidwell	2309 Mountain View Dr #170	Boise	ID	83706										
5. Organized Under the Laws of: IDAHO W 27087	6. Signature <u></u> Date <u>Nov. 29, 2006</u> Name <small>(Typed or Printed)</small> <u>STAN KIDWELL</u> Title <u>MANAGER</u>														

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