

No. C 169020		Due no later than Sep 30, 2011		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. POCATELLO HEALTH SERVICES, INC. SOON BURNAM 27101 PUERTA REAL STE 450 MISSION VIEJO CA 92691		NATIONAL REGISTERED AGENTS INC 1423 TYRELL LANE BOISE ID 83706 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	
DIRECTOR	CHRISTOPHER R CHRISTENSEN	27101 PUERTA REAL SUITE 450	MISSION VIEJO	CA	USA	92691	
TREASURER	SOON E BURNAM	27101 PUERTA REAL SUITE 450	MISSION VIEJO	CA	USA	92691	
SECRETARY	BEVERLY WITTEKIND	27101 PUERTA REAL STE 450	MISSION VIEJO	CA	USA	92691	
PRESIDENT	CHRISTOPHER R CHRISTENSEN	27101 PUERTA REAL SUITE 450	MISSION VIEJO	CA	USA	92691	
5. Organized Under the Laws of: NV C 169020		6. Annual Report must be signed.* Signature: Beverly Wittekind Name (type or print): Beverly Wittekind Date: 07/29/2011 Title: Secretary					
Processed 07/29/2011		* Electronically provided signatures are accepted as original signatures.					