

No. C 175103		Due no later than Sep 30, 2018		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. WELLNESS TREE COMMUNITY CLINIC, INC. (THE) JANEL ANDERSON 173 MARTIN ST TWIN FALLS ID 83301 USA		JANEL ANDERSON 173 MARTIN ST TWIN FALLS ID 83301-8330		
				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	TREVOR S TARTER	1445 FILLMORE STE 1101	TWIN FALLS	ID	USA	83301
DIRECTOR	JULIA FOLLOW	1150 EASTLAND BLVD. NORTH	TWIN FALLS	ID	USA	83301
PRESIDENT	JEFFREY HARRIS	2024 MOUNTAIN VIEW CIRCLE	TWIN FALLS	ID	USA	83301
SECRETARY	TRACEY DUNCAN	628 SUNSHINE DR	TWIN FALLS	ID	USA	83301
DIRECTOR	STACI MCCOMAS	652 WOODLAND DRIVE	TWIN FALLS	ID	USA	83301
DIRECTOR	RICHARD SANDISON	775 POLE LINE ROAD #105	TWIN FALLS	ID	USA	83301
TREASURER	DARAGH MACCABEE	3341 LONGBOW DR	TWIN FALLS	ID	USA	83301
DIRECTOR	DONALD PICA	3708 VISTA GRANDE LANE	TWIN FALLS	ID	USA	83301
DIRECTOR	JOEL NEWTON	2064 WASHINGTON ST N	TWIN FALLS	ID	USA	83301
5. Organized Under the Laws of: ID C 175103		6. Annual Report must be signed.* Signature: JULIA FOLLOW Name (type or print): JULIA FOLLOW Date: 08/16/2018 Title: DIRECTOR				
Processed 08/16/2018		* Electronically provided signatures are accepted as original signatures.				