

| | | | | | | | |
|--|---------------------|---|-------------|--|---------|-------------|--|
| No. C 165315 | | Due no later than Feb 28, 2013 | | 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. MELALEUCA LIFE ENHANCEMENT FOUNDATION, A NON- PROFIT CORPORATION (THE) THOMAS K KNUTSON 3910 S YELLOWSTONE IDAHO FALLS ID 83402 | | THOMAS K KNUTSON 3910 S YELLOWSTONE IDAHO FALLS ID 83402 | | | |
| | | | | 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 | THOMAS K KNUTSON | 3910 S. YELLOWSTONE | IDAHO FALLS | ID | USA | 83402 | |
| DIRECTOR | FRANK L VANDERSLOOT | 3910 S YELLOWSTONE | IDAHO FALLS | ID | USA | 83402 | |
| DIRECTOR | DAMOND WATKINS | 3910 S YELLOWSTONE | IDAHO FALLS | ID | USA | 83402 | |
| 5. Organized Under the Laws of: ID C 165315 | | 6. Annual Report must be signed.* Signature: Thomas K Knutson Name (type or print): Thomas K Knutson | | | | | |
| | | Date: 02/22/2013 Title: Director | | | | | |
| Processed 02/22/2013 | | * Electronically provided signatures are accepted as original signatures. | | | | | |