

No. W 49190

Due no later than April 30, 2008
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

COOPERATIVE HEALTH INSTITUTE LLC
TONI OBRIEN
1219 YELLOWSTONE STE B
POCATELLO, ID 83201TONI OBRIEN
1219 YELLOWSTONE STE B
POCATELLO, ID 83201NO FILING FEE IF
RECEIVED BY DUE DATE3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Managers.

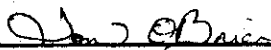
Office held	Name	Street or P.O. Address	City	State	Zip
Secretary	Toni O'Brien	RR 1 Box 91D	Pocatello	ID	83202
President (Manager)	Vicki Teuscher	5411 N. El Perce	Pocatello	ID	83204

5. Organized Under the Laws of:

IDAHO
W 49190

6.

Signature



Date

3-15-08

Name

(Typed or
Printed)

Toni O'Brien

Title

Secretary

Issued 02/01/2008

Do Not Tape or Staple

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