

No. <b>W 21204</b>		<b>Due no later than Oct 31, 2011</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  HEALTH AND WELLNESS CENTER OF IDAHO, PLLC SUSAN M INGLE 2001 S WOODRUFF #5 IDAHO FALLS ID 83404 USA		ERIC W PERTTULA 3675 COBBLESTONE LN IDAHO FALLS ID 83404			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name ERIC W PERTTULA MD	Street or PO Address 2001 S WOODRUFF #5		City IDAHO FALLS	State ID	Country USA	Postal Code 83404
5. Organized Under the Laws of:  <b>ID</b> <b>W 21204</b>		6. Annual Report must be signed.*  Signature: Susan Ingle Name (type or print): Susan Ingle  Date: 08/10/2011 Title: Offic Manager					
Processed 08/10/2011      * Electronically provided signatures are accepted as original signatures.							