No. <b>C 185633</b>		Due no	2. Registered Agent and Address (NO PO BOX)				
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  GLOBAL HEALTHCARE EXCHANGE, INC.  1315 W. CENTRUY DR.  SUITE 100		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705			
NO FILING FEE IF RECEIVED BY DUE DATE		LOUISVILLE CO 80027  ess Addresses of President, Secretary, and Directors. Treasurer (		3. New Registered Agent Signature:*			
Section (Company) The section of the section and the company of the section of th	s and busine Name	ess Addresses of Pres	Street or PO Address	City	State	Country	Postal Code
PRESIDENT B SECRETARY C TREASURER R DIRECTOR B	BRUCE JOHNSON CHRISTOPHER MCMANUS ROB GILLESPIE BRUCE JOHNSON ROB GILLESPIE		1315 W. CENTRUY DR. SUITE 100 1315 W. CENTRUY DR. SUITE 100	LOUISVILLE LOUISVILLE LOUISVILLE LOUISVILLE LOUISVILLE	CO CO CO CO	USA USA USA USA USA	80027 80027 80027 80027 80027 80027
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
DE C 195622		Signature: Kelly Lettmann		Date: 11/22/2016			
C 185633		Name (type or print): Kelly Lettmann Title: POA					
Processed 11/22/2016 * Electronically provided signatures are accepted as original signatures.							