

No. <b>W 95481</b>		<b>Due no later than Aug 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>  VHA WEST COAST INSURANCE AND FINANCIAL SERVICES, LLC DENICE THOMAS 2201 LIND AVE SW SUITE 260 RENTON WA 98057		CT CORPORATION SYSTEM 1111 W JEFFERSON STE 530 BOISE ID 83702 USA			
<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 JOHN THOMAS	Street or PO Address 2201 LIND AVENUE SW, SUITE 260		City RENTON	State WA	Country USA	Postal Code 98057
5. Organized Under the Laws of:  <b>DE</b> <b>W 95481</b>		6. Annual Report must be signed.*  Signature: John Thomas Name (type or print): John Thomas  Date: 07/22/2011 Title: Manager					
Processed 07/22/2011 * Electronically provided signatures are accepted as original signatures.							