

No. C 144422	Due no later than Jun 30, 2009 Annual Report Form	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	1. Mailing Address: Correct in this box if needed. ACHIEVING TOTAL HEALTH, INC. DIXIE L SCHARNHORST 929 16TH AVE LEWISTON ID 83501	WILLIAM J SCHARNHORT 1228 18TH ST LEWISTON ID 83501	
		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
PRESIDENT	WILLIAM J SCHARNHORST	1228 18TH STREET	LEWISTON ID USA 83501
5. Organized Under the Laws of: ID C 144422	6. Annual Report must be signed.* Signature: Dixie Date: 06/26/2009 Name (type or print): Dixie Title: Scharnhorst		
Processed 06/26/2009		* Electronically provided signatures are accepted as original signatures.	