

No. <b>C 153021</b>		<b>Due no later than Feb 29, 2012</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>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  TRONE HEALTH SERVICES, INC. DEVIN R TRONE 2790 W CHERRY LN STE 100 MERIDIAN ID 83642 USA		DEVIN R TRONE 2790 W CHERRY LN STE 100 MERIDIAN ID 83642			
						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	
SECRETARY	BECKI TRONE	1041 W HITCHCOCK ST	MERIDIAN	ID	USA	83646	
TREASURER	ALVIN D TRONE	2464 E WIGLE DR	MERIDIAN	ID	USA	83646	
PRESIDENT	DEVIN R TRONE	1041 W HITCHCOCK ST	MERIDIAN	ID	USA	83646	
5. Organized Under the Laws of:  <b>ID</b> <b>C 153021</b>		6. Annual Report must be signed.*  Signature: Alvin Trone Name (type or print): Alvin Trone					
		Date: 12/09/2011 Title: Treasurer					
Processed 12/09/2011      * Electronically provided signatures are accepted as original signatures.							