

No. <b>W 82830</b>	<b>Due no later than Apr 30, 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> HEALTHCARE INVESTMENTS, LLC BART COCHRAN 1300 E STATE ST STE 103 EAGLE ID 83616	BART COCHRAN 1300 E STATE ST STE 103 EAGLE ID 83616	
		3. <u>New</u> Registered Agent Signature:*	
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.			
Office Held	Name	Street or PO Address	City State Country Postal Code
MEMBER	BART COCHRAN	1300 E. STATE STREET SUITE 103	EAGLE ID USA 83616
5. Organized Under the Laws of:  <b>ID W 82830</b>	6. Annual Report must be signed.* Signature: Lori K Fischer Date: 04/13/2012 Name (type or print): Lori K Fischer Title: Controller		
Processed 04/13/2012		* Electronically provided signatures are accepted as original signatures.	