No. C 166749		Due no later than May 31, 2016		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		CHRISTINE KOVASH 6213 N CLOVERDALE ROAD #150 BOISE ID 83713 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. HEALTHCAST, INC. CHRISTINE M KOVASH 6213 N CLOVERDALE RD #150 BOISE ID 83713					
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Corporations: Enter Na	mes and Busin	ess Addresses of Pre	sident, Secretary, and Directors. Treasurer	(optional).			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
VICE PRESIDENT RAYMOND M PRESIDENT JOAN H MEI			6213 N CLOVERDALE RD, STE 150	BOISE	ID	USA	83713
			6213 N CLOVERDALE RD, STE 150	BOISE	ID	USA	83713
VICE PRESIDENT LORI A KELL			6213 N. CLOVERDALE RD, STE 150	BOISE	ID	USA	83713
VICE PRESIDENT	CHRISTINE I	M KOVASH	6213 N CLOVERDALE RD, STE 150	BOISE	ID	USA	83713
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
DE C 166749		Signature: ckova:	Date: 03/21/2016				
		Name (type or print): ckovash		Title: VP, Admin			
Processed 03/21/2016		* Electronically provi	ded signatures are accepted as original sig	natures.			