

No. C 189430		Due no later than Dec 31, 2015 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		1. Mailing Address: Correct in this box if needed. LIFE SPECIALISTS INC. BRADLEY D SHOWERS PO BOX 1592 BOISE ID 83701		BRADLEY D SHOWERS 5615 FRANKLIN RD BOISE ID 83706			
NO FILING FEE IF RECEIVED BY DUE DATE				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	BRAD SHOWERS	5615 FRANKLIN RD	BOISE	ID	USA	83705	
TREASURER	BRAD SHOWERS	5615 FRANKLIN	BOISE	ID	USA	83705	
PRESIDENT	BRAD SHOWERS	5615 FRANKLIN RD	BOISE	ID	USA	83705	
5. Organized Under the Laws of: ID C 189430		6. Annual Report must be signed.* Signature: Brad Showers Name (type or print): Brad Showers					
		Date: 11/10/2015 Title: President					
Processed 11/10/2015		* Electronically provided signatures are accepted as original signatures.					