

No. <b>W 91682</b>	<b>Due no later than Mar 31, 2015</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> HEALTH TO YOU, LLC ATTN LEGAL DEPT ONE PARK PLAZA NASHVILLE TN 37203		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE 83705			
			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
MANAGER	JOHN M. FRANCK II	ONE PARK PLAZA	NASHVILLE	TN	USA	37203
MANAGER	DONALD W. STINNETT	ONE PARK PLAZA	NASHVILLE	TN	USA	37203
MANAGER	SAMUEL N. HAZEN	ONE PARK PLAZA	NASHVILLE	TN	USA	37203
5. Organized Under the Laws of:  <b>TN</b> <b>W 91682</b>	6. Annual Report must be signed.* Signature: John M. Franck II Name (type or print): John M. Franck II		Date: 01/20/2015 Title: Manager			
Processed 01/20/2015		* Electronically provided signatures are accepted as original signatures.				