

No. C 153224

Due no later than February 29, 2008
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

HEALTHWORKS FAMILY CENTER INC.
PO BOX 123
SODA SPRINGS, ID 83276MELISSA A VOGEL
31 WEST CENTER
SODA SPRINGS, ID 83276NO FILING FEE IF
RECEIVED BY DUE DATE

3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

Office held	Name	Street or P.O. Address	City	State	Zip
President	Melissa Vogel	Po Box 123	Soda Springs	Id.	83276
Vice President	Doug Vogel	Po Box 123	Soda Springs	Id.	83276
Sec. Treasurer					

above President and Vice President are the Corp. Directors

5. Organized Under the Laws of:

IDAHO
C 153224

6.

Signature

Name (Typed or Printed)

Date

Title

Doug Vogel
Doug Vogel

Dec. 27.07

Vice Pres. &
Sec. Treasurer

Issued 12/03/2007

Do Not Tape or Staple

200802003173