

No. <b>W 71761</b>		<b>Due no later than Feb 28, 2010</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>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  ELEMENTS OF HEALTH LLC JUDITH L PARKER 3329 S OXBOW DRIVE NAMPA ID 83686-4939 USA		JUDITH L PARKER 3329 S OXBOW DRIVE NAMPA ID 83686			
				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	JUDITH L PARKER	3329 S OXBOW DRIVE	NAMPA	ID	USA	83686	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 71761</b>		Signature: Judith L Parker				Date: 04/05/2010	
		Name (type or print): Judith L Parker				Title: Owner/Manager	
Processed 04/05/2010		* Electronically provided signatures are accepted as original signatures.					