

| | | | | | |
|--|-----------------|--|------------|---|---------------------|
| No. W 91205 | | Due no later than Mar 31, 2011 | | 2. Registered Agent and Address (NO PO BOX) | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | Annual Report Form 1. Mailing Address: Correct in this box if needed. HC RESEARCH LLC HENRY D COVELLI 820 N COLES LOOP RD POST FALLS ID 83854 | | HENRY D COVELLI 820 N COLES LOOP RD POST FALLS ID 83854 | |
| | | | | 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 | HENRY D COVELLI | 820 COLES LOOP RD | POST FALLS | ID | USA 83854 |
| 5. Organized Under the Laws of: ID W 91205 | | 6. Annual Report must be signed.* Signature: Henry Covelli Name (type or print): Henry Covelli Date: 04/21/2011 Title: Manager | | | |
| Processed 04/21/2011 | | * Electronically provided signatures are accepted as original signatures. | | | |