

No. C 97190	Annual Report Form 1996 <i>Due No Later Than November 30,</i>		2. Registered Agent and Office NOT A P.O. BOX																			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED ** FINAL NOTICE **	1. Mailing Address - Please Correct, If Not Correct BOISE SPORTS CHIROPRACTIC CL KEVIN G HEARON 3314 N COLE RD BOISE ID 83704		KEVIN G HEARON 3314 N COLE RD BOISE ID 83704 3. Organized Under the Laws of: ID C 97190																			
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>PRESIDENT</td> <td>KEVIN G. HEARON</td> <td>3425 ARMOR ST.</td> <td>BOISE</td> <td>ID</td> <td>83704</td> </tr> <tr> <td>SECRETARY</td> <td>ALISON S. HEARON</td> <td>3425 ARMOR ST.</td> <td>BOISE</td> <td>ID</td> <td>83704</td> </tr> </tbody> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	PRESIDENT	KEVIN G. HEARON	3425 ARMOR ST.	BOISE	ID	83704	SECRETARY	ALISON S. HEARON	3425 ARMOR ST.	BOISE	ID	83704
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5. NATURE OF BUSINESS CHIROPRACTIC ISSUED: 10-05-1996	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <u><i>Kevin G. Hearon</i></u> Date <u>10-17-96</u> Name (Typed or Printed) <u>KEVIN G. HEARON</u> Title <u>PRESIDENT</u> <div style="text-align: right;">6916</div>																					