

No. C 176326		Due no later than Dec 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		1. Mailing Address: Correct in this box if needed. OREGON TRAIL EYE CARE, PC JEFFREY P COLLINS 152 S MAIN SODA SPRINGS ID 83276 USA		JEFFREY P COLLINS OD 152 S MAIN SODA SPRINGS ID 83276			
				3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	JEFFREY P COLLINS	PO BOX 54	GEORGETOWN	ID	USA	83239	
5. Organized Under the Laws of: ID C 176326		6. Annual Report must be signed.* Signature: Jeffrey P Collins, OD Name (type or print): Jeffrey P Collins, OD				Date: 10/19/2011 Title: President	
Processed 10/19/2011		* Electronically provided signatures are accepted as original signatures.					