

No. C 127938		Due no later than Mar 31, 2016		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. DUDLEY CHIROPRACTIC, P.A. DR RYAN B WEED 404 E PARKCENTER BLVD STE 170 BOISE ID 83706 USA		DR RYAN WEED 404 E PARKCENTER BLVD STE 170 BOISE ID 83706			
				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	RYAN B WEED	404 E PARKCENTER BLVD STE 170	BOISE	ID	USA	83706	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID C 127938		Signature: Ryan B Weed				Date: 01/20/2016	
		Name (type or print): Ryan B Weed				Title: President	
Processed 01/20/2016		* Electronically provided signatures are accepted as original signatures.					