

No. C 106517

Due no later than June 30, 2008

Annual Report Form

2. Registered Agent and Office NO PO BOX

MARSHA J GEHL
826 BLUE LAKES BLVD N
TWIN FALLS, ID 83301

3. New Registered Agent Signature

Return to:

SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

GEHL CHIROPRACTIC, P.A.
MARSHA J GEHL
826 BLUE LAKES BLVD N
TWIN FALLS, ID 83301

NO FILING FEE IF
RECEIVED BY DUE DATE

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

Office held

Name

Street or P.O. Address

City

State

Zip

PRES.

MARSHA J. GEHL

826 BLUE LAKES BLVD. N

TWIN FALLS

ID

83301

SEC.

DIRECTOR

5. Organized Under the Laws of:

IDAHO
C 106517

6.

Signature

Date

4.9.08

Name

(Typed or
Printed)

MARSHA

Title

Issued 04/01/2008

Do Not Tape or Staple

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