

No. C 179293	Due no later than Jul 31, 2014 Annual Report Form		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. CHAD SOMBKE, PH.D., P.C. CHAD SOMBKE PHD 2498 N STOKESBERRY PL STE 160 MERIDIAN ID 83646		CHAD SOMBKE PHD 2498 N STOKESBERRY PL STE 160 MERIDIAN ID 83646			
			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	CHAD R SOMBKE	2498 N. STOKESBERRY PL STE 160	MERIDIAN	ID	USA	83646
5. Organized Under the Laws of: ID C 179293	6. Annual Report must be signed.* Signature: Chad Sombke Name (type or print): Chad Sombke		Date: 05/13/2014 Title: Psychologist			
Processed 05/13/2014		* Electronically provided signatures are accepted as original signatures.				