

No. C 43599		Due no later than Apr 30, 2015		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. REXBURG MEDICAL CENTER PROFESSIONAL ASSOCIATION C JEFFREY ZOLLINGER 39 PROFESSIONAL PLAZA REXBURG ID 83440		ROHN HOLLMAN 393 E 2 N REXBURG 83440			
				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	JEFFERY ZOLLINGER	393 E 2 N	REXBURG	ID	USA	83440	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID C 43599		Signature: C Jeffrey Zollinger				Date: 02/17/2015	
		Name (type or print): C Jeffrey Zollinger				Title: President	
Processed 02/17/2015		* Electronically provided signatures are accepted as original signatures.					