

No. C 121062		Due no later than Sep 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		Annual Report Form		DR. R JAMES JOHNSON 1313 G ST. LEWISTON ID 83501			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		ADVANCED CHIROPRACTIC, P.A. DR. R JAMES JOHNSON PO BOX 2252 LEWISTON ID 83501 USA					
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	
SECRETARY	CYNTHIA L JOHNSON	2314 3RD AVE	CLARKSTON	WA	USA	99403	
PRESIDENT	DR. R. JAMES JOHNSON	1313 G ST	LEWISTON	ID	USA	83501	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID C 121062		Signature: Dr. R James Johnson				Date: 08/02/2015	
		Name (type or print): Dr. R James Johnson				Title: prez	
Processed 08/02/2015		* Electronically provided signatures are accepted as original signatures.					