No. <b>C 58752</b>		Due no later than Jun 30, 2017		2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		JEFFREY S TAYLOR 190 E BANNOCK BOISE ID 83712  3. New Registered Agent Signature:*				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  ANDERSON PLAZA MEDICAL BUILDING, INC. COLIN M HUDSON 190 EAST BANNOCK BOISE ID 83702						
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Nar	mes and Busin	ess Addresses of Pres	ident, Secretary, and Directors. Treasurer	(optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR DIRECTOR SECRETARY	RECTOR CHRIS J. KANTARIAN, MD		222 N SECOND STREET SUITE 103 222 N SECOND STREET SUITE 312 214 E JEFFERSON STREET	BOISE BOISE BOISE	ID ID ID	USA USA USA	83702 83702 83712	
5. Organized Under the Laws of:		6. Annual Report must be signed.* Signature: Colin Hudson		Date: 06/30/2017				
C 58752		Name (type or print): Colin Hudson		Title: Secretary				
Processed 06/30/2017	rocessed 06/30/2017 * Electronically provided signatures are accepted as original signatures.							