

No. W 8976

Due no later than June 30, 2008

Annual Report Form

2. Registered Agent and Office NO PO BOX

D JED PETERSON DC  
650 N STATE STE #1  
SHELLEY, ID 83274

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

MOUNTAIN STATES CHIROPRACTIC HEALTH  
D JED PETERSON DC  
650 N STATE STE #1  
SHELLEY, ID 83274  
USA

3. New Registered Agent Signature

NO FILING FEE IF  
RECEIVED BY DUE DATE

4. Limited Liability Companies: Enter Names and Addresses of Members.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
owner	D. JED PETERSON DC.	650 N. State Suite #1	Shelley	ID	83274

5. Organized Under the Laws of:

IDAHO  
W 8976

6.

Signature

Date

4-9-08

Name

(Typed or  
Printed)

D. JED PETERSON DC

Title

owner