No. C 184115			Due no later than Aug 31, 2018		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	Annual Report Form 1. Mailing Address: Correct in this box if needed. KING PHYSICAL THERAPY, PC SCOTT G KING 444 HIGHWAY 16 105 EMMETT ID 83617		SCOTT G KING 444 HIGHWAY 16 105 EMMETT ID 83617 3. New Registered Agent Signature:*			
		SCOTT G						
4. Corporations: Ente	er Names and	Business Addresses	of President, Secretary, and Directors. Trea	asurer (d	optional).			
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
PRESIDENT	SCOTT	GLEN KING	444 HIGHWAY 16 105		EMMETT	ID	USA	83617
5. Organized Under the Laws of:		6. Annual Rep	6. Annual Report must be signed.*					
ID C 184115		Signature:	Signature: Sctt King MPT		Date: 06/23/2018			
		Name (type	Name (type or print): Sctt King MPT			Title: President		
Processed 06/23/201	18	* Electronically	provided signatures are accepted as origin	nal signa	tures.			