

No. <b>C 192377</b>	<b>Due no later than Sep 30, 2014</b> <b>Annual Report Form</b>	2. Registered Agent and Address <b>(NO PO BOX)</b>				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b> BOISE SPINE SURGERY, P.A JOSEPH M VERSKA MD 7893 N VUE ESTATES MERIDIAN ID 83646	JOSEPH M VERSKA MD 7893 N VUE ESTATES MERIDIAN ID 83646				
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).		3. <u>New</u> Registered Agent Signature:*				
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
PRESIDENT	JOSEPH M VERSKA	7893 N VUE ESTATES	MERIDIAN	ID	USA	83646
5. Organized Under the Laws of:  <b>ID C 192377</b>	6. Annual Report must be signed.* Signature: Joe Verska Name (type or print): Joe Verska		Date: 07/21/2014 Title: President			
Processed 07/21/2014		* Electronically provided signatures are accepted as original signatures.				