No. <b>L 6720</b>		Due no later than Aug 31, 2017	2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form	the formation of the common terms of the	STEPHEN H TELFORD 1303 12TH AVE S NAMPA ID 83651			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.					
		ELITE CLINICAL TRIALS LLLP BERTA BATES 400 CORAL AVE	NAMEA ID	ועמיירא ווי 63031			
		BLACKFOOT ID 83221	3. <u>New</u> Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
GENERAL PARTNER	BERTA BATE		BLACKFOOT	ID	USA	83221	
GENERAL PARTNER GENERAL PARTNER	GARY SOUCE PAUL BECKE		BLACKFOOT SHELLEY	ID ID	USA USA	83221 83274	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID L 6720		Signature: Berta Bates Date: 08/30/2017					
		Name (type or print): Berta Bates	Title: Research Director				
Processed 08/30/2017 * Electronically provided signatures are accepted as original signatures.							