

No. C 111371		Due no later than Jul 31, 2016 Annual Report Form		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 Address: Correct in this box if needed. EAGLE PHYSICAL THERAPY, P.A. RANDY LANGLEY 176 W SUTTER DR EAGLE ID 83616		RANDY LANGLEY 176 W SUTTER DR EAGLE ID 83616			
						3. <u>New</u> Registered Agent Signature:*	
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	RANDY LANGLEY	176 W SUTTER DR	EAGLE	ID	USA	83616	
5. Organized Under the Laws of: ID C 111371		6. Annual Report must be signed.* Signature: Randy Langley Name (type or print): Randy Langley Date: 05/24/2016 Title: President					
Processed 05/24/2016 * Electronically provided signatures are accepted as original signatures.							