No. C 126562		Due no later than Dec 31, 2017		2	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			RICHARD J THOMAS, D.C. 605 N SHETLAND CT POST FALLS ID 83854			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. LIFE CHIROPRACTIC CENTER, P.A. RICHARD J THOMAS 605 N SHETLAND CT		ed.				
		POST FALLS ID 83854		3	3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Nar	mes and Busin	ess Addresses of	President, Secretary, and Directors. Tre	easurer (op	otional).			
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
PRESIDENT	RICHARD J	THOMAS	9062 BLOSSOM DRIVE		HAYDEN	ID	USA	83835
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 126562		Signature: kathy kral			Date: 11/01/2017			
		Name (type or print): kathy kral			Title: office manager			
Processed 11/01/2017		* Electronically provided signatures are accepted as original signatures.						