

No. W 99888		Due no later than Jan 31, 2015		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		Annual Report Form		UNITED STATES CORPORATION AGEN 950 BANNOCK ST STE 1100 BOISE 83702			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		LANCE THERAPY SERVICES LLC MICHELLE LANCE 13345 RESERVATION POCATELLO ID 83202					
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	MICHELLE L LANCE	13345 RESERVATION	POCATELLO	ID	USA	83202	
MANAGER	KELLY G LANCE	13345 RESERVATION	POCATELLO	ID	USA	83202	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 99888		Signature: Michelle Lance			Date: 11/17/2014		
		Name (type or print): Michelle Lance			Title: M.S. CCC-SLP		
Processed 11/17/2014		* Electronically provided signatures are accepted as original signatures.					