

No. C 149014		Due no later than May 31, 2015 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. KOTH SPORTS PHYSICAL THERAPY, P.A. JOHN C KOTH PO BOX 5232 KETCHUM ID 83340-5232 USA		JOHN C KOTH 101 SADDLE RD 2ND FLOOR KETCHUM 83340			
				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	
PRESIDENT	JOHN C KOTH	101 SADDLE ROAD 2ND FLOOR PO BOX 5232	KETCHUM	ID	USA	83340-5232	
SECRETARY	SHERRI L KOTH	101 SADDLE ROAD 2ND FLOOR PO BOX 1510	KETCHUM	ID	USA	83340-1510	
DIRECTOR	JOHN C KOTH	101 SADDLE ROAD 2ND FLOOR PO BOX 5232	KETCHUM	ID	USA	83340-5232	
5. Organized Under the Laws of: ID C 149014		6. Annual Report must be signed.* Signature: John C Koth Name (type or print): John C Koth					
Processed 03/25/2015		Date: 03/25/2015 Title: its President					
* Electronically provided signatures are accepted as original signatures.							