No. **C 161193**	**Due no later than Jun 30, 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.** PEDIATRIC AND ADOLESCENT CENTER, INC. (THE) WILLIAM S BOURQUARD 6148 N DISCOVERY WAY SUITE 100 BOISE ID 83713	DR WILLIAM BOURQUARD 6148 N DISCOVERY WAY SUITE 100 BOISE ID 83713 3. New 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	WILLIAM S BOURQUARD, MD	6148 N DISCOVERY WAY SUITE 100	BOISE	ID	USA	83713

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **C 161193**	Signature: SARA WUDARCKI Name (type or print): SARA WUDARCKI	Date: 04/26/2016 Title: OFFICE MANAGER

Processed 04/26/2016

* Electronically provided signatures are accepted as original signatures.