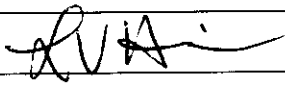


<b>No. C 162005</b>  Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>Due no later than August 31, 2006</b> <b>Annual Report Form</b> <b>1. Mailing Address - Correct in this box, if applicable</b> COLLEGE OF NATUROPATHIC MEDICINE AN 1443 ANNY DR E TWIN FALLS, ID 83301	<b>2. Registered Agent and Office NO PO BOX</b> LAURENCE V HICKS 1443 ANNY DR E TWIN FALLS, ID 83301  <b>3. New Registered Agent Signature</b>
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**4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.**

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
PRESIDENT -	LAURENCE V. HICKS	153 BLUE LAKES BLVD. N.	TWIN FALLS	ID	83301
V. P	- GEOFFREY N. HICKS	153 BLUE LAKES BLVD N.	TWIN FALLS	ID	83301
SECRETARY -	JARED C. HICKS	153 BLUE LAKES BLVD N.	TWIN FALLS	ID	83301

<b>5. Organized Under the Laws of:</b>  IDAHO C 162005	<b>6.</b> Signature  Date <u>6/17/06</u> Name (Typed or Printed) <u>LAURENCE V. HICKS</u> Title <u>PRESIDENT</u>
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Issued 06/01/2006

**Do Not Tape or Staple**

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