No. C 116611		Due no later than Oct 31, 2017		2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. DR. THOMAS R. BOYER, P.C. THOMAS R. BOYER 717 D STREET LEWISTON ID 83501		THOMAS R. BOYER 717 D STREET LEWISTON ID 83501 3. New Registered Agent Signature:*				
								NO FILING FEE IF RECEIVED BY DUE DATE
4. Corporations: Enter Name	es and Busin	ess Addresses of P	resident, Secretary, and Directors. Tr	reasurer (optional).			
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
PRESIDENT	THOMAS R	BOYER	717 D STREET		LEWISTON	ID	USA	83501
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Thomas R Boyer			Date: 11/30/2017			
C 116611		Name (type or print): Thomas R Boyer			Title: Officer/President			
Processed 11/30/2017 * Electronically provided signatures are accepted as original signatures.								