No. C 117891		Due no later than Jan 31, 2017		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		JAMES W KRANZ			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	KRANZ CH JAMES W 910 N CUF	1. Mailing Address: Correct in this box if needed. KRANZ CHIROPRACTIC, CHARTERED JAMES W KRANZ 910 N CURTIS RD BOISE ID 83706		910 N CURTIS RD BOISE ID 83706 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Corporations: Enter Names an	d Business Addresse	s of President, Secretary, and Directors. Trea	surer (optional).				
Office Held Name	:	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT JAME:	S W KRANZ	910 N CURTIS RD	BOISE	ID	USA	83706	
5. Organized Under the Laws of: 6. Annual Report must be signed.*							
ID	Signature	Signature: james w kranz		Date: 02/17/2017			
C 117891	Name (ty	Name (type or print): james w kranz		Title: president			
Processed 02/17/2017	* Electronica	* Electronically provided signatures are accepted as original signatures.					