

No. C 199718	Due no later than Sep 30, 2017 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. DR. MATTHEW BLACK D.O. FACOEP PC MATTHEW BLACK 329 S WOODRUFF AVE IDAHO FALLS ID 83401		MATTHEW BLACK 329 S WOODRUFF AVE IDAHO FALLS ID 83401			
			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	MATTHEW BLACK	329 S WOODRUFF AVE	IDAHO FALLS	ID	USA	83401
5. Organized Under the Laws of: ID C 199718		6. Annual Report must be signed.* Signature: MATTHEW BLACK Name (type or print): MATTHEW BLACK		Date: 09/12/2017 Title: PRES		
Processed 09/12/2017		* Electronically provided signatures are accepted as original signatures.				