


<b>No. W 19040</b>	<b>Due no later than Apr 30, 2003</b> <b>Annual Report Form</b>	2. Registered Agent and Office <b>NO PO BOX</b> LUKE C MAYES DC 5978 OVERLAND RD BOISE, ID 83709
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>	1. Mailing Address - Correct in this box, if applicable MAYES SPECIFIC CHIROPRACTIC P.L.L.C LUKE C MAYES DC 5978 OVERLAND RD BOISE, ID 83709	3. <u>New</u> Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Managers.

Office held	Name	Street or P.O. Address	City	State	Zip
President	Luke C. Mayes	9067 oakmont Ct.	Boise	ID	83704

5. Organized Under the Laws of:  IDAHO W 19040	6. Signature <u></u> Date <u>2/10/03</u> Name <small>(Typed or Printed)</small> <u>Dr Luke C. Mayes</u> Title <u>owner/ Pres</u>
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