No. C 160521		Due	2. Registered	2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		TERI J CO	TERI J COTTINGHAM MD 999 N CURTIS RD STE 505			
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. IDAHO DERMATOLOGIC SURGERY & LASER CENTER, P.A. TERI J COTTINGHAM MD 999 N CURTIS RD STE 505 BOISE ID 83706						
				BOISE ID 83706 3. New Registered Agent Signature:*				
								4. Corporations: Enter Nan
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY	HENRY THOMPSON		999 N CURTIS RD STE 505	BOISE	ID	USA	83706	
PRESIDENT	IDENT TERI J COTT		999 N CURTIS RD., STE 505	BOISE	ID	USA	83706	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Laura Osborn		D	Date: 05/21/2013			
C 160521		Name (type or	Т	Title: Office Manager				
Processed 05/21/2013			ovided signatures are accepted as original si					