

No. W 99904		Due no later than Jan 31, 2016 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		1. Mailing Address: Correct in this box if needed. ANTHONY JUDD ANDERSON, M.D., PLLC ANTHONY JUDD ANDERSON 1404 POMERELLE AVE STE B BURLEY ID 83318 USA		ANTHONY JUDD ANDERSON 1404 POMERELLE AVE STE B BURLEY ID 83318			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name LINDSEY G ANDERSON	Street or PO Address 1404 POMERELLE AVE STE B		City BURLEY	State ID	Country USA	Postal Code 83318
5. Organized Under the Laws of: ID W 99904		6. Annual Report must be signed.* Signature: Lindsey Anderson Name (type or print): Lindsey Anderson Date: 11/18/2015 Title: office manager					
Processed 11/18/2015 * Electronically provided signatures are accepted as original signatures.							