No. <b>W 26527</b>	Due no later than Oct 31, 2012		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form		CONTROL STATE OF THE STATE OF	ROBERT C ENGLE PHD			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.			380 E. PARKCENTER BLVD SUITE 210 BOISE ID 83706-3964			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	ROBERT C. ENGLE, PH.D., P.L.L.C. ROBERT C ENGLE, PHD. 380 E. PARKCENTER BLVD SUITE 210						
			3. <u>New</u> Registe	3. New Registered Agent Signature:*			
NO FILING FEE IF BOISE ID 83706-396 RECEIVED BY DUE DATE USA		6-3964					
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER ROBERT C	ENGLE PHD	380 E PARKCENTER BLVD	BOISE	ID	USA	83706	
5. Organized Under the Laws of: 6. Annual Report must be signed.*							
ID	Signature: Robert C Engle, PhD			Date: 08/10/2012			
W 26527	Name (type or print): Robert C Engle, PhD			Title: Senior Member			
Processed 08/10/2012	* Electronically provided signatures are accepted as original signatures.						