No. C 133905		Due no later than May 31, 2012	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form	PATRICK J ZAK			
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.	409 S THIRD ST STE C MCCALL ID 83638			
		PRO-ACTIVE PHYSICAL THERAPY OF MCCALL, P.A. PATRICK J ZAK PO BOX 2041		O3036		
		MCCALL ID 83638	3. New Registered Agent Signature:*			
		USA				
4. Corporations: Enter	r Names and Busine	ess Addresses of President, Secretary, and Directors. Treasurer	(optional).			
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
PRESIDENT SECRETARY	PATRICK J Z TERRI E ZAK		MCCALL MCCALL	ID ID	USA USA	83638 83638
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
ID		Signature: Terri Zak	Date: 03/13/2012			
C 133905		Name (type or print): Terri Zak Title: Secretary				
Processed 03/13/2012	2 ;	* Electronically provided signatures are accepted as original sign	natures.			