

No. C 67487		Due no later than Aug 31, 2013		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form		BOYD L. HAMMOND, M.D. 772 KINSWOOD IDAHO FALLS ID 83404			
		1. Mailing Address: Correct in this box if needed. BOYD L. HAMMOND, M.D., P.A. BOYD L HAMMOND, MD PO BOX 2376 IDAHO FALLS ID 83403-2376 USA		3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
SECRETARY	YVONNE HAMMOND	PO BOX 2376	IDAHO FALLS	ID	USA	83403-2376	
PRESIDENT	BOYD L HAMMOND	PO BOX 2376	IDAHO FALLS	ID	USA	83403-2376	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID C 67487		Signature: Richard K. Hale				Date: 06/19/2013	
		Name (type or print): Richard K. Hale				Title: C P A	
Processed 06/19/2013		* Electronically provided signatures are accepted as original signatures.					