

No. C 111129

Due no later than June 30, 2007

2. Registered Agent and Office NO PO BOX

Annual Report Form

Return to:

SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

LILJENQUIST CHIROPRACTIC, P.A.
CODY LILJENQUIST
1700 OVERLAND AVE
BURLEY, ID 83318

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1700 OVERLAND AVE
BURLEY, ID 83318

NO FILING FEE IF
RECEIVED BY DUE DATE

3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	Cody Liljenquist	1700 Overland	Burley	ID	83318
Secretary	Cody Liljenquist	1700 Overland	Burley	ID	83318
Directors	Cody Liljenquist	1700 Overland	Burley	ID	83318

5. Organized Under the Laws of:

IDAHO
C 111129

6.

Signature

Cody Liljenquist

Date 4-6-07

Name

(Typed or Printed)

Cody Liljenquist

Title

Owner/President

Issued 04/02/2007

Do Not Tape or Staple

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