

No. C 121274	Due no later than Oct 31, 2001 Annual Report Form	2. Registered Agent and Office NO PO BOX ROBERT C MONTGOMERY 355 W MYRTLE STE 102 BOISE, ID 83702
Return to: 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 applicable STRAWN CHIROPRACTIC, P.A. ROBERT C MONTGOMERY 355 W MYRTLE STE 102 BOISE, ID 83702	3. New Registered Agent Signature

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

Office held	Name	Street or P.O. Address	City	State	Zip
President	David Strawn	4948 Kootenai, Ste B	Boise	ID	83705
Secretary	Melissa Johnson	4948 Kootenai, Ste B	Boise	ID	83705

5. Organized Under the Laws of: <div style="text-align: center;">IDAHO C 121274</div>	6. <div style="text-align: center; margin-top: 20px;"> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>Signature _____</div> <div>Date <u>10-4-01</u></div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>Name <small>(Typed or Printed)</small> <u>Dave Strawn</u></div> <div>Title <u>President</u></div> </div>
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