No. C 118608	Due no later than Mar 31, 2016		2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form		COREY MATTHEWS DC			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.			403 S 11TH STE 110 BOISE ID 83702		
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	MATTHEWS CHIROPRACTIC, P.C. COREY MATTHEWS 403 S 11TH #110 BOISE ID 83702		BOISE ID			
			3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE						
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 ANDREA B MATTHEWS 1100 ARBOR ISLAND WAY		EAGLE	ID	USA	83616	
5. Organized Under the Laws of:	Organized Under the Laws of: 6. Annual Report must be signed.*					
ID	Signature: Corey Ma	Date: 01/21/2016				
C 118608	C 118608 Name (type or print): Corey Matthews, D.C.		Title: President			
Processed 01/21/2016	* Electronically provided signatures are accepted as original signatures.					