No. <b>C 44833</b>		1	2. Registered	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  1. Mailing Address: Correct in this box if needed.  CHARLES J. MORRIS PROFESSIONAL CORPORATION CHARLES J. MORRIS 2536 N SILVERLEAF WAY MERIDIAN ID 83646 USA		Contraction of the American Contraction	DR. CHARLES J. MORRIS 2536 N SILVERLEAF WAY MERIDIAN ID 83646			
				3. <u>New</u> Registe	3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names	and Busin	ess Addresses o	f President, Secretary, and Directors. Treasur	er (optional).				
Office Held N	ame		Street or PO Address	City	State	Country	Postal Code	
TREASURER LL	LUCILLE P MORRIS		2536 N.SILVERLEAF WAY NONE	MERIDIAN	ID	USA	83646	
SECRETARY LUCILLE P MORRIS		MORRIS	2536 N.SILVERLEAF WAY NONE	MERIDIAN	ID	USA	83646	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 44833		Signature: 0		Date: 11/09/2009				
		Name (type		Title: Pres,				
Processed 11/09/2009		* Electronically provided signatures are accepted as original signatures.						