

No. <b>C 106064</b>		<b>Due no later than Apr 30, 2016</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  O'NEILL CLINIC, P.A. (THE) T DANIEL O'NEILL 1617 LINCOLN WAY COEUR D'ALENE ID 83814		T DANIEL O'NEILL 1617 LINCOLN WAY COEUR D'ALENE ID 83814			
				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	
PRESIDENT	T DANIEL O'NEILL	1617 LINCOLN WAY	COEUR D'ALENE	ID	USA	83814	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID C 106064</b>		Signature: T. Dahiel O'Neill				Date: 04/04/2016	
		Name (type or print): T. Dahiel O'Neill				Title: DC	
Processed 04/04/2016		* Electronically provided signatures are accepted as original signatures.					