No. <b>C 117891</b>		Due no later than Jan 31, 2015		2	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.  KRANZ CHIROPRACTIC, CHARTERED  JAMES W KRANZ  910 N CURTIS RD  BOISE ID 83706  USA			JAMES W KRANZ 910 N CURTIS RD BOISE 83706  3. New Registered Agent Signature:*			
2000 000 10		ess Addresses	of President, Secretary, and Directors. Treas	surer (o <sub>l</sub>	ptional).			
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
PRESIDENT	JAMES W F	(RANZ	910 N CURTIS RD		BOISE	ID	USA	83706
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 117891		Signature: james w kranz			Date: 11/19/2014			
		Name (type or print): james w kranz			Title: president			
Processed 11/19/201	.4	* Electronically	provided signatures are accepted as original	al signat	ures.	_		_