

No. **C 123906**

Due no later than May 31, 2005
Annual Report Form

2. Registered Agent and Office **NO PO BOX**

ROBERT C. MONTGOMERY CHTD
2160 S TWIN RAPID WAY
BOISE, ID 83709

Return to:

SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

HENZE CHIROPRACTIC, P.A.
MICHAEL T. HENZE
~~8890~~ W OVERLAND RD
BOISE, ID 83709

9211

**NO FILING FEE IF
RECEIVED BY DUE DATE**

3. New Registered Agent Signature

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

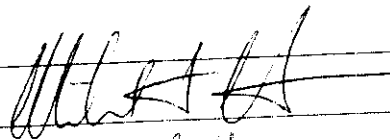
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	Michael Henze	11020 W. Wagon Pass	Boise	ID	83709
Secretary	Tamara Henze	" " " "	"	"	"

5. Organized Under the Laws of:

IDAHO
C 123906

6.

Signature



Date 3/15/05

Name

(Typed or
Printed)

Michael Henze

Title

President

200505005170

Issued 03/01/2005

Do Not Tape or Staple