

No. <b>W 77124</b>		<b>Due no later than Aug 31, 2011</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>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  ADVANCED EYECARE OF BLACKFOOT, PLLC JERRY D CARLSON 1213 PARKWAY DRIVE BLACKFOOT ID 83221		JERRY CARLSON 1213 PARKWAY DRIVE BLACKFOOT ID 83221			
				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	JERRY D CARLSON	1213 PARKWAY DRIVE	BLACKFOOT	ID	USA	83221	
MANAGER	JASON HURLEY	1213 PARKWAY DRIVE	BLACKFOOT	ID	USA	83221	
5. Organized Under the Laws of:  <b>ID W 77124</b>		6. Annual Report must be signed.* Signature: Jason Hurley Name (type or print): Jason Hurley					
		Date: 09/09/2011 Title: Owner					
Processed 09/09/2011		* Electronically provided signatures are accepted as original signatures.					