

No. <b>C 127062</b>		<b>Due no later than Jan 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>1. Mailing Address: Correct in this box if needed.</b>  ANDERSON CHIROPRACTIC CARE, P.A. GEFF D ANDERSON 9632 W EMERALD STE A BOISE ID 83704		ROBERT C. MONTGOMERY, CHTD 2160 S TWIN RAPID WAY BOISE ID 83709			
				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	
SECRETARY	KATHLEEN ANDERSON	9632 W EMERALD ST SUITE A	BOISE	ID	USA	83704	
PRESIDENT	GEFF ANDERSON	9632 W EMERALD ST SUITE A	BOISE	ID	USA	83704	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID C 127062</b>		Signature: Geff Anderson				Date: 11/30/2010	
		Name (type or print): Geff Anderson				Title: President	
Processed 11/30/2010		* Electronically provided signatures are accepted as original signatures.					