No. <b>C 153052</b>		Du	2. Registered	2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  ROSENBERG CHIROPRACTIC P.C.  JAMES R ROSENBERG  8170 W. BECKTON LANE  BOISE ID 83714		1150 W 67	JAMES R ROSENBERG 1150 W STATE ST STE 220 BOISE ID 83714-8371  3. New Registered Agent Signature:*			
				BOISE ID				
NO FILING FEE IF RECEIVED BY DUE DATE		USA						
4. Corporations: Enter	Names and Busin	ess Addresses of	President, Secretary, and Directors. Trea	asurer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	JAMES R R	OSENBERG	8170 W. BECKTON LANE	BOISE	ID	USA	83714	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Jar		Date: 12/21/2017				
C 153052		Name (type or		Title: Owner				
Processed 12/21/2017	* Electronically provided signatures are accepted as original signatures.							