No. <b>C 191983</b>		Due no later than Aug 31, 2017		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.  SCOTT A. REED M.D., P.C. SCOTT A REED MD 301 S DIVISION PINEHURST ID 83850		SCOTT A REED MD 301 S DIVISION PINEHURST ID 83850  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE  4. Corporations: Enter Names and Busine		oss Addresses of President Secretary	and Directors Treasurer (	ontional)			
Office Held	Name	Street or PO	10.00	City	State	Country	Postal Code
DIRECTOR SECRETARY PRESIDENT	SCOTT A R SCOTT A R SCOTT A R	ED 301 S DIVISI	ON	PINEHURST PINEHURST PINEHURST	ID ID ID	USA USA USA	83850 83850 83850
5. Organized Under the Laws of: ID C 191983		6. Annual Report must be signed.* Signature: Scott A Reed Name (type or print): Scott A Reed		Date: 09/28/2017 Title: President			
Processed 09/28/2017 * Electronically provided signatures are accepted as original signatures.							