

No. <b>C 101037</b>	<b>Due no later than Feb 29, 2016</b> <b>Annual Report Form</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>  PHILIP MCCOWIN ORTHOPEDICS, P.A. PHILIP R MCCOWIN 4735 E BAILEY LN IDAHO FALLS ID 83406	PHILIP R MCCOWIN 4735 E BAILEY LN IDAHO FALLS ID 83406  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	MARY P MCCOWIN	4735 E BAILEY LN	IDAHO FALLS	ID	USA	83406
5. Organized Under the Laws of:  <b>ID C 101037</b>	6. Annual Report must be signed.* Signature: Mary McCowin Name (type or print): Mary McCowin		Date: 12/28/2015 Title: Secretary			
Processed 12/28/2015		* Electronically provided signatures are accepted as original signatures.				