

No. C 143942

Due no later than May 31, 2004  
Annual Report Form

Return to:  
SECRETARY OF STATE  
700 WEST JEFFERSON  
PO BOX 83720  
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

BENNETT CHIROPRACTIC CENTER, P.A.  
KATHY RENEE BENNETT  
923 GRANT ST

CALDWELL, ID 83605

2. Registered Agent and Office **NO PO BOX**

KATHY RENEE BENNETT  
923 GRANT ST

CALDWELL, ID 83605

3. New Registered Agent Signature

**NO FILING FEE IF  
RECEIVED BY DUE DATE**

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

Office held	Name	Street or P.O. Address	City	State	Zip
President	Kathy R. Bennett	923 Grant St.	Caldwell	ID	83605
Sect.	Brienne Bennett	" " "	"	"	"

5. Organized Under the Laws of:

IDAHO  
C 143942

6.

Signature

*Kathy R. Bennett*

Date

3/25/04

Name (Typed or Printed)

Kathy R. Bennett

Title

Owner Pres.

Issued 03/02/2004

Do Not Tape or Staple