

No. <b>C 95773</b>		<b>Due no later than Jul 31, 2015</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> LIFE SPRING WOMEN'S CLINIC, P.A. CRAIG Z. HALL 1660 JOHN ADAMS PARKWAY IDAHO FALLS ID 83401-4360 USA		CRAIG Z. HALL 1660 JOHN ADAMS PARKWAY IDAHO FALLS ID 83401-4360			
				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	
PRESIDENT	CRAIG Z. HALL	1660 JOHN ADAMS PARKWAY	IDAHO FALLS	ID	USA	83401-4360	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID C 95773</b>		Signature: Craig Z. Hall, M.D.				Date: 05/19/2015	
		Name (type or print): Craig Z. Hall, M.D.				Title: President	
Processed 05/19/2015		* Electronically provided signatures are accepted as original signatures.					