

No. C 70458		Due no later than Jul 31, 2015		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. MOLDENHAUER CHIROPRACTIC CENTER P.C. GLENN W MOLDENHAUER 228 HOLLY ST NAMPA ID 83686 USA		GLENN W MOLDENHAUER 228 HOLLY ST NAMPA ID 83686			
				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	GLENN W MOLDENHAUER	1604 MIDDLE CREEK CT	NAMPA	ID	USA	83686	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID C 70458		Signature: Glenn W. Moldenhauer				Date: 06/05/2015	
		Name (type or print): Glenn W. Moldenhauer				Title: President	
Processed 06/05/2015		* Electronically provided signatures are accepted as original signatures.					