

No. <b>C 114120</b>		<b>Due no later than Mar 31, 2009</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>Annual Report Form</b>		MARSHALL MERRELL 3762 PORTER LN REXBURG ID 83440			
		<b>1. Mailing Address: Correct in this box if needed.</b>		3. <u>New</u> Registered Agent Signature:*			
		MERRELL EYECARE CENTER, P.A. (THE) MARSHALL MERRELL 3762 PORTER LN REXBURG ID 83440					
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	MARSHALL H MERRELL	3762 PORTER LN	REXBURG	ID	USA	83440	
SECRETARY	JAN S MERRELL	3762 PORTER LN	REXBURG	ID	USA	83440	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID C 114120</b>		Signature: Jan Merrell			Date: 01/13/2009		
		Name (type or print): Jan Merrell			Title: Secretary		
Processed 01/13/2009		* Electronically provided signatures are accepted as original signatures.					