The state of the s		ater than Jan 31, 2018	2. Registered Agent and Address (NO PO BOX)			
Return to: Annual		ual Report Form	JARED ALLEN 2105 CORONADO ST IDAHO FALLS ID 83404-8340			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed. PROFESSIONAL OB/GYN ASSOCIATES P.A. MARGARET HUGGINS 2290 CORTEZ AVE					
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080						
	IDAHO FALLS ID 83404		3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE	1 15 1 1					
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 MARGARET	MONARCH HUGGINS	2990	IDAHO FALLS	ID	USA	83404
5. Organized Under the Laws of:	6. Annual Report must					
ID	Signature: Margaret	Date: 12/11/2017				
C 212409	Name (type or print): Margaret Huggins		Title: President			
Processed 12/11/2017	* Electronically provided signatures are accepted as original signatures.					