

No. C 138544		Due no later than Apr 30, 2017		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		ALICE BLAKE MD 1216 N 21ST BOISE ID 83702			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		A.P.B. MEDICAL, P.C. ALICE BLAKE 1216 N 21ST BOISE ID 83702					
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	
SECRETARY	TRACEY A SHEEHAN	1216 NORTH 21 ST STREET	BOISE	ID	USA	83702-2407	
PRESIDENT	ALICE P BLAKE	1216 NORTH 21 ST STREET	BOISE	ID	USA	83702-2407	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID C 138544		Signature: Alice Blake			Date: 03/05/2017		
		Name (type or print): Alice Blake			Title: MD		
Processed 03/05/2017		* Electronically provided signatures are accepted as original signatures.					