No. C 120820		Due no later than Sep 30, 2016	2. Registered Agent and Address (NO PO BOX)					
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed BADGER MEDICAL, P.A. JEFF KELLER 3389 MERLIN DRIVE IDAHO FALLS ID 83404-7405	d.	JEFF KELLER 3389 MERLIN DRIVE IDAHO FALLS ID 83404-7405 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Busine		ss Addresses of President, Secretary, and Directors. Trea	acurar ((ontional)				
Office Held Nam		Street or PO Address	usurci (City	State	Country	Postal Code	
	GELA M K FREY E K			IDAHO FALLS IDAHO FALLS	ID ID	USA USA	83404-7405 83404-7405	
5. Organized Under the Laws of:		6. Annual Report must be signed.* Signature: Angela Keller Date: 07/25/2016						
C 120820		Name (type or print): Angela Keller			Title: Secretary			
Processed 07/25/2016	* Electronically provided signatures are accepted as original signatures.							