

No. C 180202		Due no later than Sep 30, 2009		Annual Report Form				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		1. Mailing Address: Correct in this box if needed. LIVE WELL CHIROPRACTIC, P.C. LANE N CABLE 3163 E FAIRVIEW AVE #155 MERIDIAN ID 83642 USA		LANE CABLE 4902 SE 2ND AVE NEW PLYMOUTH ID 83655				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	LANE N CABLE	3163 E FAIRVIEW AVE #155	MERIDIAN	ID	USA	83642			
5. Organized Under the Laws of: ID C 180202		6. Annual Report must be signed.* Signature: Lane N Cable Name (type or print): Lane N Cable							
						Date: 07/16/2009 Title: President			
Processed 07/16/2009		* Electronically provided signatures are accepted as original signatures.							