

No. C 174444	Due no later than Aug 31, 2016 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. GAIL A KISLING, MS, CCC-SLP, INC. GAIL KISLING 3378 E LEROY DR AMMON ID 83406		GAIL A KISLING 3378 E LEROY DR AMMON ID 83406			
			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	GAIL KISLING	3378 E LEROY DR	AMMON	ID	USA	83406
5. Organized Under the Laws of: ID C 174444	6. Annual Report must be signed.* Signature: Gail Kisling Name (type or print): Gail Kisling		Date: 08/27/2016 Title: President			
Processed 08/27/2016		* Electronically provided signatures are accepted as original signatures.				