

No. C 140427		Due no later than Aug 31, 2010		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 1. Mailing Address: Correct in this box if needed. EAGLE CRAMER CHIROPRACTIC, P.A. TODD R CRAMER 440 E STATE ST #100 EAGLE ID 83616		TODD R CRAMER 233 W STATE ST STE A EAGLE ID 83616			
				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	
SECRETARY	DENELLE R CRAMER	440 E STATE STREET, SUITE 100	EAGLE	ID	USA	83616	
PRESIDENT	TODD R CRAMER	440 E STATE STREET, SUITE 100	EAGLE	ID	USA	83616	
5. Organized Under the Laws of: ID C 140427		6. Annual Report must be signed.* Signature: Todd R Cramer Name (type or print): Todd R Cramer Date: 06/15/2010 Title: President					
Processed 06/15/2010		* Electronically provided signatures are accepted as original signatures.					