No. <b>C 186580</b>		Due no later than Mar 31, 2017		2. Registered	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.  MAXFIELD HEALTHCARE SOLUTIONS, P.C.  BRETT B MAXFIELD  143 N 3762 E  RIGBY ID 83442		143 N 3762 RIGBY ID	BRETT B MAXFIELD  143 N 3762 E RIGBY ID 83442  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
700 97 2	es and busin Name	ess Addresses or	President, Secretary, and Directors. Treas Street or PO Address	City	State	Country	Postal Code	
SECRETARY N	MELISSA L MAXFIELD BRETT B MAXFIELD		143 N 3762 E 143 N 3762 E	RIGBY RIGBY	ID ID	USA USA	83442 83442	
5. Organized Under the Laws of:  ID  C 186580		6. Annual Report must be signed.* Signature: Brett B. Maxfield Name (type or print): Brett B. Maxfield			Date: 03/12/2017 Title: President			
Processed 03/12/2017		* Electronically provided signatures are accepted as original signatures.						