

No. <b>C 115798</b>		<b>Due no later than Jul 31, 2013</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  HIGH PEAKS PHYSICAL THERAPY, P.A. JUDY BAUMGARDNER PO BOX 129 DRIGGS ID 83422		JUDY BAUMGARDNER 2333 E. 5000 SOUTH VICTOR ID 83455			
						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	LOUIS J. PARRI	P.O. BOX 129	DRIGGS	ID	USA	83422	
PRESIDENT	JUDY M. BAUMGARDNER	P.O. BOX 129	DRIGGS	ID	USA	83422	
5. Organized Under the Laws of:  <b>ID</b> <b>C 115798</b>		6. Annual Report must be signed.*  Signature: Judy M. Baumgardner Name (type or print): Judy M. Baumgardner					
Processed 05/23/2013		Date: 05/23/2013 Title: President  * Electronically provided signatures are accepted as original signatures.					