

No. W 13873	Due no later than Dec 31, 2017 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. PHYSICAL THERAPY PLUS OF IDAHO, PLLC SYDNEY L PRAEGER PO BOX 2182 KETCHUM ID 83340-2182		SYDNEY PRAEGER 180 WEST 1ST STREET STE 101 KETCHUM ID 83340-2182			
			3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MEMBER	SYDNEY PRAEGER	PO BOX 2182	KETCHUM	ID		83340-2182
MEMBER	MIKE L. THOMPSON	PO BOX 2513	KETCHUM	ID	USA	83340-2513
5. Organized Under the Laws of: ID W 13873	6. Annual Report must be signed.* Signature: Mike Thompson Name (type or print): Mike Thompson		Date: 10/31/2017 Title: member			
Processed 10/31/2017		* Electronically provided signatures are accepted as original signatures.				