

No. C 50234		Due no later than Oct 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. PRACTICE MANAGEMENT, INC. PAUL DEWITT 1755 WESTGATE, STE 200 BOISE ID 83704		PAUL DEWITT 1755 WESTGATE STE 200 BOISE ID 83704			
						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	SHANNON ANGUS	POB 45456	BOISE	ID	USA	83711	
PRESIDENT	PAUL D DEWITT	5276 S. FARMHOUSE PLACE	BOISE	ID	USA	83716	
5. Organized Under the Laws of: ID C 50234		6. Annual Report must be signed.* Signature: Linda Edwards Name (type or print): Linda Edwards Date: 10/31/2017 Title: Office Manager					
Processed 10/31/2017 * Electronically provided signatures are accepted as original signatures.							