

No. <b>C 177650</b>		<b>Due no later than Mar 31, 2014</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>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  ASPEN CHIROPRACTIC P.C. JASON C LEE 1532 W CAYUSE CREEK DR MERIDIAN ID 83646		DR JASON C LEE 1532 W CAYUSE CREEK DR MERIDIAN ID 83646			
				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	
PRESIDENT	JASON C LEE	1532 W. CAYUSE CREEK DR.	MERIDIAN	ID	USA	83646	
5. Organized Under the Laws of:  <b>ID C 177650</b>		6. Annual Report must be signed.* Signature: Jason C Lee Name (type or print): Jason C Lee Date: 04/09/2014 Title: Owner					
Processed 04/09/2014		* Electronically provided signatures are accepted as original signatures.					