

No. <b>C 187547</b>		<b>Due no later than Jun 30, 2018</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>  MARK MCCONNELL, M.D., INC. MARK MCCONNELL 3772 E TIMBERSAW DR BOISE ID 83716		MARK MCCONNELL 3772 TIMBERSAW DRIVE BOISE ID 83716-5514			
						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	MARK S MCCONNELL	3772 TIMBERSAW DRIVE	BOISE	ID	USA	83716-5514	
5. Organized Under the Laws of:  <b>ID</b> <b>C 187547</b>		6. Annual Report must be signed.*  Signature: Mark McConnell Name (type or print): Mark McConnell  Date: 04/23/2018 Title: President					
Processed 04/23/2018      * Electronically provided signatures are accepted as original signatures.							