

No. C 120503

Due no later than August 31, 2008

2. Registered Agent and Office NO PO BOX

Return to:

SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

Annual Report Form

1. Mailing Address - Correct in this box, if applicable

ST. MARIES CHIROPRACTIC, P.A.
MARLENE K SAUNDERS HESS
1117 MAIN AVE STE 4
ST. MARIES, ID 83861

MARLENE K SAUNDERS HESS
1117 MAIN AVE STE 4
ST. MARIES, ID 83861

NO FILING FEE IF
RECEIVED BY DUE DATE

3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

Office held	Name	Street or P.O. Address	City	State	Zip
President	Marlene Saunders	1117 main, Ste 4	St. Maries	ID	83861
Secretary	Jim Hess	330 S. 4 th St.	St. Maries	ID	83861

5. Organized Under the Laws of:
IDAHO
C 120503

6.

Signature

Marlene K Saunders

Date

8-28-08

Name

(Typed or
Printed)

Marlene K. Saunders

Title

DC

Issued 06/02/2008

Do Not Tape or Staple

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