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| No. C 169020 | | Due no later than Sep 30, 2015 | | 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. POCATELLO HEALTH SERVICES, INC. SOON BURNAM 27101 PUERTA REAL STE 450 MISSION VIEJO CA 92691 | | NATIONAL REGISTERED AGENTS INC 921 S ORCHARD ST STE G BOISE ID 83705 | | | |
| | | | | 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 | |
| DIRECTOR | CHRISTOPHER R CHRISTENSEN | 27101 PUERTA REAL SUITE 450 | MISSION VIEJO | CA | USA | 92691 | |
| TREASURER | SOON E BURNAM | 27101 PUERTA REAL SUITE 450 | MISSION VIEJO | CA | USA | 92691 | |
| SECRETARY | BEVERLY WITTEKIND | 27101 PUERTA REAL STE 450 | MISSION VIEJO | CA | USA | 92691 | |
| PRESIDENT | SPENCER BURTON | 27101 PUERTA REAL SUITE 450 | MISSION VIEJO | CA | USA | 92691 | |
| 5. Organized Under the Laws of: NV C 169020 | | 6. Annual Report must be signed.* Signature: BEVERLY WITTEKIND Name (type or print): BEVERLY WITTEKIND Date: 09/29/2015 Title: SECRETARY | | | | | |
| Processed 09/29/2015 | | * Electronically provided signatures are accepted as original signatures. | | | | | |