

No. C 193657		Due no later than Feb 28, 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		Annual Report Form 1. Mailing Address: Correct in this box if needed. SCORESBY CHIROPRACTIC CENTER PA DEVIN P SCORESBY 3042 OAKWOOD CIRCLE AMMON ID 83406		DAVID BISHOP 3042 OAKWOOD CIRCLE AMMON 83406		
				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	MELISSA T SCORESBY	3929 TAYLORVIEW LANE	AMMON	ID	USA	83406
DIRECTOR	DEVIN P SCORESBY	3929 TAYLORVIEW LANE	AMMON	ID	USA	83406
SECRETARY	MELISSA T SCORESBY	3929 TAYLORVIEW LANE	AMMON	ID	USA	83406
PRESIDENT	DEVIN P SCORESBY	3929 TAYLORVIEW LANE	AMMON	ID	USA	83406
5. Organized Under the Laws of: ID C 193657		6. Annual Report must be signed.* Signature: Devin P Scoresby Name (type or print): Devin P Scoresby Date: 01/08/2015 Title: President				
Processed 01/08/2015		* Electronically provided signatures are accepted as original signatures.				