

No. C 175051		Due no later than Sep 30, 2013 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. CHRISTOPHER J. GOULET, M.D., P.A. STEVEN FARRO 6259 W EMERALD STREET BOISE ID 83704 USA		CHRISTOPHER J GOULET MD 6259 W EMERALD STREET BOISE ID 83704			
NO FILING FEE IF RECEIVED BY DUE DATE				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	
SECRETARY	CHRISTOPHER J GOULET	6259 W EMERALD STREET	BOISE	ID	USA	83704	
PRESIDENT	CHRISTOPHER J GOULET	6259 W EMERALD STREET	BOISE	ID	USA	83704	
DIRECTOR	CHRISTOPHER J GOULET	6259 W EMERALD STREET	BOISE	ID	USA	83704	
5. Organized Under the Laws of: ID C 175051		6. Annual Report must be signed.* Signature: Steven Farro Name (type or print): Steven Farro					
		Date: 07/15/2013 Title: Administrator					
Processed 07/15/2013 * Electronically provided signatures are accepted as original signatures.							