

No. C 185350		Due no later than Dec 31, 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. STRICKLAND EAR CLINIC PC TOSHA K STRICKLAND 10112 W OVERLAND ROAD BOISE ID 83709		TOSHA STRICKLAND 798 E BOULDER BAR ST MERIDIAN ID 83646			
				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	TOSHA K STRICKLAND	10112 W OVERLAND ROAD	BOISE	ID	USA	83709	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID C 185350		Signature: Tara Spencer			Date: 10/26/2015		
		Name (type or print): Tara Spencer			Title: Office Manager		
Processed 10/26/2015		* Electronically provided signatures are accepted as original signatures.					