No. **C 199290**	**Due no later than Aug 31, 2017**	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.** TETON HEALTHCARE, INC. 27101 PUERTA REAL STE 450 MISSION VIEJO CA 92691	NATIONAL REGISTERED AGENTS INC 921 S ORCHARD ST STE G BOISE ID 83705-9269 3. New 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 CHRISTENSEN	27101 PUERTA REAL STE 450	MISSION VIEJO	CA	USA	92691
TREASURER	ELLIOT MCMILLAN	27101 PUERTA REAL STE 450	MISSION VIEJO	CA	USA	92691
PRESIDENT	DANIEL WALKER	27101 PUERTA REAL STE 450	MISSION VIEJO	CA	USA	92691
SECRETARY	BEVERLY WITTEKIND	27101 PUERTA REAL STE 450	MISSION VIEJO	CA	USA	92691
VICE PRESIDENT	JOHN GOCHNOUR	27101 PUERTA REAL STE 450	MISSION VIEJO	CA	USA	92691

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
NV **C 199290**	Signature: Beverly Wittekind Name (type or print): Beverly Wittekind	Date: 08/14/2017 Title: Secretary
Processed 08/14/2017	* Electronically provided signatures are accepted as original signatures.	