

No. C 181462		Due no later than Jan 31, 2011		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. ALPINE CHIROPRACTIC: A CREATING WELLNESS CENTER, P.A. JUSTIN T HAMMON 555 1ST ST IDAHO FALLS ID 83401 USA		JUSTIN HAMMON 555 1ST ST IDAHO FALLS ID 83401			
				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	JUSTIN T HAMMON	555 FIRST STREET	IDAHO FALLS	ID	USA	83401	
5. Organized Under the Laws of: ID C 181462		6. Annual Report must be signed.* Signature: Justin Hammon, D.C Name (type or print): Justin Hammon, D.C				Date: 11/30/2010 Title: President	
Processed 11/30/2010		* Electronically provided signatures are accepted as original signatures.					