

No. W 131427		Due no later than Nov 30, 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		1. Mailing Address: Correct in this box if needed. MANNING NEUROSURGERY, PLLC NEUROSCIENCE ASSOCIATES 6140 W CURTISIAN AVE #400 BOISE ID 83704		DR THOMAS C MANNING 6140 W CURTISIAN AVE #400 BOISE ID 83704			
				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	THOMAS C MANNING	6140 W CURTISIAN AVE STE 400	BOISE	ID	USA	83704-8907	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 131427		Signature: Emily Lawrence				Date: 10/07/2015	
		Name (type or print): Emily Lawrence				Title: Accounting Supervisor	
Processed 10/07/2015		* Electronically provided signatures are accepted as original signatures.					