



# Idaho Corporation Annual Report Form

File online at: [sos.idaho.gov](http://sos.idaho.gov)

Due no later than: 12/31/2019

Return completed form within 30 days to:

Idaho Secretary of State

Attn: Annual Reports

450 North 4th Street

Boise, ID 83720

Phone: (208) 334-2300

Annual Report: No filing fee if received by the due date.

SOS Control Number: 374699

Filing Status: Active-Good Standing

Professional Service Corporation (D)

Date Formed: 12/29/1997

Formation Locale: ID

## Name and Mailing Address:

(1) Add or Change Mailing Address:

DONALD PAUL WORKMAN, M.D., P.A. *sole owner*  
3100 HEATHERWOOD RD  
TWIN FALLS, ID 83301-8100

## Registered Agent (RA) and Registered Office (RO) Address:

(2) Change RA and/or RO Address:

DONALD PAUL WORKMAN  
3100 HEATHERWOOD  
TWIN FALLS, ID 83301

Note: The Registered Office address must be a physical Idaho address (no postal box).

## (3) New Registered Agent (RA) Signature:

If a new agent is appointed in item (2) above, the new agent must sign here to accept the appointment

(4) Corporations: Enter names and business addresses (with zip code) of the President, Vice President, Secretary, Treasurer.

Title	Name	Business Address	City, State, Zip
<i>President/Owner</i>	<i>Donald P Workman M.D., P.A.</i>	<i>440 Shoup Ave W. Suite 200</i>	<i>Twin Falls, ID 83301</i>

(5) Board of Directors names and business addresses (with zip code). Attach additional sheet if necessary.

*No Board of Directors*

Name	Business Address	City, State, Zip
<i>Donald P Workman sole owner</i>	<i>440 Shoup Ave W. Suite 200</i>	<i>Twin Falls, ID 83301</i>

(5) Signature:

*Donald P Workman*

(6) Date:

*12/4/2019*

(7) Type/Print Name:

*Donald P Workman*

(8) Title:

*Secretary of corp.*

Instructions: Legibly complete the form above. Sign and date this form and return to the address provided above.

B0421-4819 12/24/2019 8:55 AM Received by ID Secretary of State Lawrence Denney