

No. C 214921	Due no later than Aug 31, 2018 Annual Report Form		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. K. L. BUSTER OD PC K L BUSTER 252 CHENEY DRIVE WEST TWIN FALLS ID 83301		K L BUSTER 252 CHENEY DRIVE WEST TWIN FALLS ID 83301			
			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	KRISTINA L BUSTER	252 CHENEY DR. W.	TWIN FALLS	ID	USA	83301
5. Organized Under the Laws of: ID C 214921	6. Annual Report must be signed.* Signature: KL Buster, ODPC Name (type or print): KL Buster, ODPC		Date: 08/02/2018 Title: President			
Processed 08/02/2018		* Electronically provided signatures are accepted as original signatures.				