| No. <b>J 2182</b>  |          | Due no later than Jun 30, 2013   |                      |   | 2. Registered Agent and Address (NO PO BOX)          |       |         |             |
|--|----------|--|----------------------|---|--|-------|---------|-------------|
| Return to:   |          | Annual Report Form   |                      |   | ROLAND V MORRISON  309 E LOGAN ST  CALDWELL ID 83605 |       |         |             |
| SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080                   |          | 1. Mailing Address: Correct in this box if needed.                                   |                      | ! |  |       |         |             |
|  |          | BALANCE POINT CHIROPRACTIC, LLP PAULA L TURRELL 309 E LOGAN ST CALDWELL ID 83605 USA |                      |   |  |       |         |             |
|  |          |  |                      |   | 3. New Registered Agent Signature:*                  |       |         |             |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE   |          |  |                      |   |  |       |         |             |
| 4. Limited Liability Partnerships: Enter Names and Business Addresses of two (2) or more partners. |          |  |                      |   |  |       |         |             |
| Office Held Nar  | me       |  | Street or PO Address |   | City   | State | Country | Postal Code |
| PARTNER JAR  | RS PC    |  | 309 E LOGAN ST       |   | CALDWELL   | ID    | USA     | 83605       |
| PARTNER ROI  | LAND V I | MORRISON   | 309 E LOGAN ST       |   | CALDWELL   | ID    | USA     | 83605       |
| 5. Organized Under the Laws of:  |          | 6. Annual Report must be signed.*  |                      |   |  |       |         |             |
| ID<br>J 2182   |          | Signature: Jaron Soren   |                      |   | Date: 04/23/2013                                     |       |         |             |
|  |          | Name (type or print): Jaron Soren  |                      |   | Title: Partner                                       |       |         |             |
| Processed 04/23/2013   |          | * Electronically provided signatures are accepted as original signatures.            |                      |   |  |       |         |             |