

No. C 141271		Due no later than Nov 30, 2011 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. CENTRUM HEARING SERVICES, INC. KIMBERLY DAVIS 804 YELLOWSTONE POCATELLO ID 83201-4415 USA		RON J CONLIN 804 YELLOWSTONE POCATELLO ID 83201-4415			
						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	RON J CONLIN	804 YELLOWSTONE	POCATELLO	ID	USA	83201-4415	
5. Organized Under the Laws of: ID C 141271		6. Annual Report must be signed.* Signature: Kimberly Davis Name (type or print): Kimberly Davis Date: 09/09/2011 Title: Receptionist					
Processed 09/09/2011 * Electronically provided signatures are accepted as original signatures.							