No. W 35787	Due no later than Jan 31, 2017		2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form		H MICHAEL RUSSELL			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.		204 PROSPECT AVE HARRISON ID 83833-0198			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	AFFORDABLE PHYSICAL THERAPY, P.L.L.C. H MICHAEL RUSSELL PO BOX 198		LIMINISON ID 03033-0130			
	HARRISON ID 83833-0198		3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF	USA					
RECEIVED BY DUE DATE	IVED BY DUE DATE					
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 H MICHAEL RUSSELL		PO BOX 198 204 PROSPECT AVE	HARRISON	ID	USA	83833-0198
5. Organized Under the Laws of:	6. Annual Report must be					
Signature: h michael russell		russell	Date: 01/03/2017			
W 35787	Name (type or print): h michael russell		Title: manager			
Processed 01/03/2017	* Electronically provided signatures are accepted as original signatures.					