

No. C 209666		Due no later than Apr 30, 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		1. Mailing Address: Correct in this box if needed. PREMIER PHYSICAL THERAPY, INC. 1006 S CLEAR CREEK DR BOISE ID 83709		ANTHONY BOOK 1006 S CLEAR CREEK DR BOISE ID 83709			
NO FILING FEE IF RECEIVED BY DUE DATE				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	ANTHONY RAY BOOK	1006 S CLEAR CREEK DR	BOISE	ID	USA	83709	
5. Organized Under the Laws of: ID C 209666		6. Annual Report must be signed.* Signature: Anthony R Book Name (type or print): Anthony R Book Date: 03/16/2018 Title: Owner					
Processed 03/16/2018 * Electronically provided signatures are accepted as original signatures.							