

No. C 83562		Due no later than Apr 30, 2013 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. NATIONAL BOARD OF HOMEOPATHIC EXAMINERS, INC. THOMAS COUCH 760 WARM SPRING SUITE A-1 BOISE ID 83712-6459 USA		EDWIN C FLOYD 760 WARM SPRING SUITE A-1 BOISE ID 83712-6459			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors, Treasurer (optional).						3. <u>New</u> Registered Agent Signature:*	
Office Held DIRECTOR	Name KATHY GREEN	Street or PO Address 760 WARMSPRING	City BOISE	State ID	Country USA	Postal Code 83712-6459	
5. Organized Under the Laws of: ID C 83562		6. Annual Report must be signed.* Signature: Thomas Couch Name (type or print): Thomas Couch Date: 02/19/2013 Title: Executive Director					
Processed 02/19/2013 * Electronically provided signatures are accepted as original signatures.							