No. <b>C 184219</b>	Due no later than Aug 31, 2014 Annual Report Form		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:				HEATHER CORBET			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.  HEATHER CORBET OCCUPATIONAL THERAPY INC.  HEATHER M CORBET  111 ROSEWOOD AVE			111 ROSEWOOD AVE POCATELLO ID 83204			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080			POCATELLO	POCATELLO ID 83204			
	POCATELLO ID 83204		3. <u>New</u> Registere	3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Corporations: Enter Names and Busir	ness Addresses of	President, Secretary, and Directors. Treasu	ırer (optional).				
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT HEATHER M	1 CORBET	111 ROSEWOOD AVE	POCATELLO	ID	USA	83204	
5. Organized Under the Laws of:	6. Annual Report must be signed.*						
ID	Signature: H.Corbet		Da	Date: 06/17/2014			
C 184219	Name (type or print): H.Corbet		Tit	Title: President			
Processed 06/17/2014	* Electronically provided signatures are accepted as original signatures.						