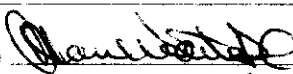


No. C 84396	Due no later than July 31, 2005 Annual Report Form		2. Registered Agent and Office NO PO BOX ALAN L. WAITE, D.C. 54 W COURT STREET WEISER, ID 83672		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable WEISER CHIROPRACTIC CENTER, P.A. ALAN L. WAITE, D.C. 54 W COURT ST WEISER, ID 83672		3. <u>New</u> Registered Agent Signature		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.					
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	Alan L. Waite D.C.	841 County Rd 70	Weiser	Idaho	83672
Secretary	Christine L. Waite	841 County Rd 70	Weiser	Idaho	83672
Director	Aaron Alder	411 Hill Rd	Weiser	Idaho	83672
Director	Paul Alder	1572 Scholaske Rd	Weiser	Idaho	83672
5. Organized Under the Laws of: IDAHO C 84396		6. Signature  Date <u>5-16-05</u> Name (Typed or Printed) <u>Alan L. Waite, D.C.</u> Title <u>Pres.</u>			

Issued 05/02/2005

Do Not Tape or Staple

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