No. C 84396	Due no later than July 31, 2005 Annual Report Form	2. Registered Agent and Office **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 applicable WEISER CHIROPRACTIC CENTER, P.A. ALAN L. WAITE, D.C. 54 W COURT ST WEISER, ID 83672	ALAN L. WAITE, D.C. 54 W COURT STREET WEISER, ID 83672 3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

Office held	Name	Street or P.O. Address	City	State	Zip
President	Alan L. Waite DC	841 County Rd 70	Weiser	Idaho	83672
Secretary	Christina 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:	6.
IDAHO C 84396	Signature [signature] Date 5-16-05 Name (Typed or Printed) Alan L Waite, DC. Title Pres.

Issued 05/02/2005

Do Not Tape or Staple

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