

No. C 202344	Due no later than Jun 30, 2015 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. TOUCHSTONE MEDICAL CORPORATION KEVIN J HATHAWAY PO BOX 50261 IDAHO FALLS ID 83405 USA		KEVIN HATHAWAY 1005 ADA AVE IDAHO FALLS ID 83402			
			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	KEVIN JAMES HATHAWAY	1005 ADA AVE	IDAHO FALLS	ID	USA	83402
5. Organized Under the Laws of: ID C 202344	6. Annual Report must be signed.* Signature: Kevin Hathaway Name (type or print): Kevin Hathaway		Date: 04/29/2015 Title: President			
Processed 04/29/2015		* Electronically provided signatures are accepted as original signatures.				