No. C 204408		Due no later than Dec 31, 2015	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		Annual Report Form 1. Mailing Address: Correct in this box if needed. IDAHO NATUROPATHIC MEDICAL PHYSICIANS, INC 2524 N STOKESBERRY PLACE MERIDIAN ID 83646	GARRY L SHOHET 2524 N STOKESBERRY PLACE MERIDIAN ID 83646 3. New Registered Agent Signature:*				
4. Corporations: Enter Names a	and Busine	ess Addresses of President, Secretary, and Directors. Treasurer	(optional).				
Office Held Nar	ne	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT GARRY SHOHI		HET 2524 N. STOKESBERRY PLACE	MERIDIAN	ID	USA	83646	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: Garry Shohet	Date: 10/15/2015				
C 204408		Name (type or print): Garry Shohet Title: registered agent					
Processed 10/15/2015	* Electronically provided signatures are accepted as original signatures.						