No. C 157984		Due no later than Dec 31, 2016 Annual Report Form 1. Mailing Address: Correct in this box if needed. P.C.M.R. FOUNDATION, INC. DR. SAMUEL FASSIG 9212 S TALON LANE BOISE ID 83709		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				9212 S TAL BOISE ID	DR SAMUEL M FASSIG 9212 S TALON LANE BOISE ID 83705 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Busine		ness Addresses o	f President, Secretary, and Directors. Tre	easurer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	SAMUEL FA	SSIG	9212 S. TALON LANE	BOISE	ID	USA	83709	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: D		Date: 12/18/2016				
C 157984		Name (type		Title: President				
Processed 12/18/2016	* Electronically provided signatures are accepted as original signatures.							