No. C 161266		Due no later than Jul 31, 2016 Annual Report Form 1. Mailing Address: Correct in this box if needed. DAVID HASSINGER MD, INC. DAVID HASSINGER 4052 W QUAIL HILL CT BOISE ID 83703		2. Registere	2. Registered Agent and Address (NO PO BOX)			
Return to:					DAVID HASSINGER MD			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				BOISE II	4052 W QUAIL HILL CT BOISE ID 83703 3. New Registered Agent Signature:*			
NO FILING RECEIVED BY	DUE DATE	oss Addrossos of	President, Secretary, and Directors. Trea	Surar (ontional)				
Office Held	Name Name	less Addi esses di	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT			4052 W QUAIL HILL CT	BOISE	ID	USA	83703	
5. Organized Under the Laws of:		6. Annual Repo						
ID C 161266		Signature: Da		Date: 05/31/2016				
		Name (type o		Title: President				
Processed 05/31/2016)	* Electronically p	provided signatures are accepted as origin	al signatures.				