







## STATE OF IDAHO

Office of the secretary of state, Lawerence Denney REINSTATEMENT ANNUAL REPORT

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$30.00

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-FILED-

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Reinstatement Annual Report Form

Select one: Standard, Expedited or Same Day Service (see

descriptions below) **Current Entity Name** 

Standard (filing fee \$30)

COMPLETE FAMILY EYE CARE, P.A.

The file number of this entity on the records of the Idaho Secretary 0000551961

of State is:

Organized under the laws of: **IDAHO** 

**Entity Type:** Professional Service Corporation (D)

Professional Service Corporation Name:

Professional Service Corporation Name COMPLETE FAMILY EYE CARE, P.A.

The business is organized to practice the profession of: Optometry

The registered agent on record is:

Registered Agent

**NATALIE JONES** Registered Agent Physical Address 351 W. 300 N. BLACKFOOT, ID 83221

Mailing Address

The mailing address of the corporation is:

720 N MERIDIAN ST

STE A

BLACKFOOT, ID 83221-4936

Corporate Officers and Directors:

| Name           | Title | Address                            |
|----------------|-------|------------------------------------|
| + Cody E Jones |       | 351 W 300 N<br>BLACKFOOT, ID 83221 |

The Application for Reinstatement must be signed by at least one governor.

Job Title: President

Cody E Jones 10/30/2021

Sign Here Date