

No. <b>C 97113</b>	<b>Due no later than Dec 31, 2017</b> <b>Annual Report Form</b>	2. Registered Agent and Address <b>(NO PO BOX)</b>				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b> NORTH IDAHO EYE INSTITUTE, P.A. BEN GABY 1814 LINCOLN WAY COEUR D'ALENE ID 83814	DE DE KAREN SINES 1814 LINCOLN WAY COEUR D'ALENE ID 83814  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
VICE PRESIDENT	D JUSTIN STORMOGIPSON	1814 LINCOLN WAY	COEUR D'ALENE	ID	USA	83814
PRESIDENT	TAD BUCKLAND	1814 LINCOLN WAY	COEUR D ALENE	ID	USA	83814
DIRECTOR	ALISON M GRANIER	1814 LINCOLN WAY	COEUR D ALENE	ID	USA	83814
DIRECTOR	DAVID DANCE	1814 LINCOLN WAY	COEUR D ALENE	ID	USA	83814
DIRECTOR	SARA DUKE	1814 LINCOLN WAY	COEUR D ALENE	ID	USA	83814
5. Organized Under the Laws of:  <b>ID C 97113</b>	6. Annual Report must be signed.* Signature: Ben Gaby Name (type or print): Ben Gaby		Date: 01/19/2018 Title: Executive Director			
Processed 01/19/2018		* Electronically provided signatures are accepted as original signatures.				