

No. C 160653		Due no later than May 31, 2011		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		1. Mailing Address: Correct in this box if needed. WILLIAMS CHIRO MED, INC. MICHAEL F. WILLIAMS 13900 W WAINWRIGHT DR STE 103 BOISE ID 83713 USA		JERRY BERMENSOLO CPA 1087 W RIVER ST STE 280 BOISE ID 83702		
				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
PRESIDENT	MICHAEL F. WILLIAMS	13900 W. WAINWRIGHT DR. SUITE 103	BOISE	ID	USA	83713
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
ID C 160653		Signature: Michael F. Williams			Date: 03/15/2011	
		Name (type or print): Michael F. Williams			Title: President	
Processed 03/15/2011		* Electronically provided signatures are accepted as original signatures.				