

No. C 173737	Due no later than Jun 30, 2017 Annual Report Form	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. INTEGRATED DISABILITY MANAGEMENT, INC. KEITH S PADUCH 5824 N COBBLER LANE BOISE ID 83703	KEITH S PADUCH 5824 N COBBLER LANE BOISE ID 83703 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	KEITH S PADUCH	5824 N. COBBLER LANE	BOISE	ID		83703
5. Organized Under the Laws of: ID C 173737	6. Annual Report must be signed.* Signature: Keith S Paduch Name (type or print): Keith S Paduch		Date: 05/06/2017 Title: President			
Processed 05/06/2017		* Electronically provided signatures are accepted as original signatures.				