

No. C 135001		Due no later than Aug 31, 2017		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		Annual Report Form		MARK E BELNAP DC 521 E HALLIDAY ST POCATELLO ID 83201-6563			
		1. Mailing Address: Correct in this box if needed. BELNAP CHIROPRACTIC, P.A. TAMI BELNAP 521 E HALLIDAY ST POCATELLO ID 83201-6563		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	MARK E BELNAP	521 E HALLIDAY ST	POCATELLO	ID	USA	83201-6563	
SECRETARY	TAMI BELNAP	521 E. HALLIDAY	POCATELLO	ID	USA	83201-6563	
5. Organized Under the Laws of: ID C 135001		6. Annual Report must be signed.* Signature: Tami Belnap Name (type or print): Tami Belnap					
		Date: 06/19/2017 Title: Secretary					
Processed 06/19/2017		* Electronically provided signatures are accepted as original signatures.					