

No. C 122472		Due no later than Jan 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		Annual Report Form 1. Mailing Address: Correct in this box if needed. KNOWLES CHIROPRACTIC, P.A. JOHN RICHARD KNOWLES III 7153 W. EMERALD BOISE ID 83704		ROBERT C. MONTGOMERY, CHTD. 2160 S TWIN RAPID WAY BOISE ID 83709			
				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	
SECRETARY	LINDA KNOWLES	7153 W EMERALD ST	BOISE	ID	USA	83704	
TREASURER	JOHN R. KNOWLES III	7153 W EMERALD ST	BOISE	ID	USA	83704	
PRESIDENT	JOHN R. KNOWLES III	7153 W EMERALD ST	BOISE	ID	USA	83704	
5. Organized Under the Laws of: ID C 122472		6. Annual Report must be signed.* Signature: Dr. John R Knowles Iii Name (type or print): Dr. John R Knowles Iii Date: 02/03/2011 Title: Ceo					
Processed 02/03/2011		* Electronically provided signatures are accepted as original signatures.					