

No. C 152881

Due no later than January 31, 2007  
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

SECRETARY OF STATE  
700 WEST JEFFERSON  
PO BOX 83720  
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

KUNA CHIROPRACTIC FAMILY CARE CENTE  
PO BOX 215  
KUNA, ID 83634

KEVIN A ROSENBLUND  
~~323 AVE C #3~~ 675 W. 4th St.  
KUNA, ID 83634

3. New Registered Agent Signature

NO FILING FEE IF  
RECEIVED BY DUE DATE

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Pres, Sec, Dir	- Kevin A. Rosenlund	PO Box 215 675 W. 4th St.	Kuna	ID	83634

5. Organized Under the Laws of:

IDAHO  
C 152881

6.

Signature

*Kevin A Rosenlund*

Date

11-28-04

Name

(Typed or  
Printed)

Title