

No. C 205976	Due no later than May 31, 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. C-PRO MEDICAL ALERT INC. 3597 MONARCH SKY LN STE F240 MERIDIAN ID 83646	JOHN MICHELSEN 3814 BISMARCK AVE CALDWELL ID 83605 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
DIRECTOR	CHARLES JOHN MICHELSEN IV	14098 MONTERREY ST	CALDWELL	ID	USA	83607
5. Organized Under the Laws of: ID C 205976	6. Annual Report must be signed.* Signature: john michelsen Name (type or print): john michelsen		Date: 08/07/2017 Title: president			
Processed 08/07/2017		* Electronically provided signatures are accepted as original signatures.				