No. C 117480		Due no later than Dec 31, 2013		2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Ro	Annual Report Form		RICHARD L ELLIOT, M.D.			
SECRETARY OF STATE	1. Mailing Address: Corr	1. Mailing Address: Correct in this box if needed.		500 S 11TH POCATELLO ID 83201			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	RICHARD L. ELLIOTT, M.D., P.A. MELINDA ELLIOTT 500 S 11TH STE 206						
	POCATELLO ID 83201-483	POCATELLO ID 83201-4835		3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Corporations: Enter Names and I	susiness Addresses of President, Sec	retary, and Directors. Trea	asurer (op	otional).			
Office Held Name	Stree	t or PO Address		City	State	Country	Postal Code
PRESIDENT RICHARD L ELLIOTT 500 S. 11TH, STE 206			POCATELLOI	ID	USA	83201	
5. Organized Under the Laws of: 6. Annual Report must be signed.*							
ID	ID Signature: Melinda Elliott			Date: 11/15/2013			
C 117480	Name (type or print): Melino	Name (type or print): Melinda Elliott		Title: Secretary			
Processed 11/15/2013	* Electronically provided signatures are accepted as original signatures.						