

No. C 142701		Due no later than Feb 29, 2016		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. BRIAN W. CHRISTENSEN M.D., P.A. BRIAN W CHRISTENSEN 20 MADISON PROF PARK REXBURG ID 83440		BRIAN W CHRISTENSEN 20 MADISON PROF PARK REXBURG ID 83440		
				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
TREASURER	KARIE J CHRISTENSEN	20 MADISON PROFESSIONAL PARK	REXBURG	ID	USA	83440
SECRETARY	BRIAN W CHRISTENSEN	20 MADISON PROFESSIONAL PARK	REXBURG	ID	USA	83440
PRESIDENT	BRIAN W CHRISTENSEN	20 MADISON PROFESSIONAL PARK	REXBURG	ID	USA	83440
5. Organized Under the Laws of: ID C 142701		6. Annual Report must be signed.* Signature: brian Name (type or print): brian Date: 12/28/2015 Title: president				
Processed 12/28/2015		* Electronically provided signatures are accepted as original signatures.				