

No. **W 19278**

Due no later than May 31, 2005
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

FAMILY EYECARE SPECIALISTS, PLLC
WILLIAM T BLACK
420 E ELM ST
CALDWELL, ID 83605

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420 E ELM ST
CALDWELL, ID 83605

3. New Registered Agent Signature

**NO FILING FEE IF
RECEIVED BY DUE DATE**

4. Limited Liability Companies: Enter Names and Addresses of Members.

Office held Name

Street or P.O. Address

City

State

Zip

1st name owner

William T Black

420 E ELM ST

Caldwell

ID 83605

5. Organized Under the Laws of:

IDAHO
W 19278

6.

Signature

Date

3/16/05

Name

(Typed or
Printed)

William Black

Title

owner