

No. C 110201	Due no later than Apr 30, 2018 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. HAYDEN VISION CENTER P.A. ROBERT SORENSEN 8445 GOVERNMENT WAY HAYDEN LAKE ID 83835		ROBERT A SORENSEN 8445 GOVERNMENT WAY HAYDEN LAKE ID 83835			
			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
PRESIDENT	ROBERT A SORENSEN	PO BOX 8	HAYDEN	ID	USA	83835
SECRETARY	JACQUELINE M MEREDITH	8445 N GOVERNMENT WAY	HAYDEN	ID	USA	83835
5. Organized Under the Laws of: ID C 110201	6. Annual Report must be signed.* Signature: Robert A Sorensen Name (type or print): Robert A Sorensen		Date: 03/06/2018 Title: President			
Processed 03/06/2018		* Electronically provided signatures are accepted as original signatures.				