

No. <b>C 120831</b>	<b>Due no later than Sep 30, 2018</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b> LIFESTYLES CHIROPRACTIC P.A. DR JANET SERMON 1159 E IRON EAGLE DR STE 100 EAGLE ID 83616		JANET SERMON 1159 E IRON EAGLE DR STE 100 EAGLE ID 83616			
			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	JANET SERMON	1159 E. IRON EAGLE DRIVE SUITE 100	EAGLE	ID	USA	83616
5. Organized Under the Laws of:  <b>ID C 120831</b>		6. Annual Report must be signed.* Signature: JANET L SERMON Name (type or print): JANET L SERMON		Date: 07/30/2018 Title: PRESIDENT		
Processed 07/30/2018		* Electronically provided signatures are accepted as original signatures.				