

No. <b>C 187403</b>		<b>Due no later than Jun 30, 2015</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>Annual Report Form</b>		KEITH P MCGUINNESS 155 E BEACON LIGHT ROAD EAGLE ID 83616			
		<b>1. Mailing Address: Correct in this box if needed.</b> CORPORATION FOR OBESITY PRACTITIONER EDUCATION KEITH P MCGUINNESS PO BOX 1492 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	
DIRECTOR	KEITH P MCGUINNESS	155 E. BEACON LIGHT RD	EAGLE	ID	USA	83616	
SECRETARY	KEITH P MCGUINNESS	155 E. BEACON LIGHT RD	EAGLE	ID	USA	83616	
PRESIDENT	KEITH P MCGUINNESS	155 E. BEACON LIGHT RD	EAGLE	ID	USA	83616	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID C 187403</b>		Signature: Keith McGuinness				Date: 06/24/2015	
		Name (type or print): Keith McGuinness				Title: President	
Processed 06/24/2015		* Electronically provided signatures are accepted as original signatures.					