

No. C 201834		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. TETON VALLEY VISION, P.C. THOMAS SIMMONS PO BOX 979 VICTOR ID 83455		THOMAS SIMMONS OD 10 CEDRON RD VICTOR ID 83455			
						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	THOMAS SIMMONS	PO BOX 979	VICTOR	ID	USA	83455	
5. Organized Under the Laws of: ID C 201834		6. Annual Report must be signed.* Signature: Thomas Simmons Name (type or print): Thomas Simmons Date: 02/26/2018 Title: owner					
Processed 02/26/2018 * Electronically provided signatures are accepted as original signatures.							