

No. <b>C 154132</b>	<b>Due no later than Apr 30, 2013</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>1. Mailing Address: Correct in this box if needed.</b>  SNAKE RIVER DERMATOLOGY, P.A. CONNIE L HARRIS 1611 N WHITLEY DR STE 7 FRUITLAND ID 83619 USA		GERALD G OVERLY MD 1611 N WHITLEY DR STE 7 FRUITLAND ID 83619				
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>			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	BROCK ANDERSEN	1611 N WHITLEY DR STE 7	FRUITLAND	ID	USA	83619	
5. Organized Under the Laws of:  <b>ID</b> <b>C 154132</b>	6. Annual Report must be signed.*  Signature: Brock Andersen Name (type or print): Brock Andersen					Date: 02/28/2013 Title: President	
Processed 02/28/2013	* Electronically provided signatures are accepted as original signatures.						