

No. <b>C 103192</b>		<b>Due no later than Aug 31, 2016</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>  DR. JAMES S. LUCKOCK, P.A. DR JAMES S LUCKOCK P O BOX 1765 TWIN FALLS ID 83303-1765		DR JAMES S LUCKOCK 105 FILER AVE TWIN FALLS ID 83301			
				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	DR JAMES S LUCKOCK	PO BOX 1765	TWIN FALLS	ID	USA	83303-1765	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID C 103192</b>		Signature: Dr. James S Luckock P.A.				Date: 07/18/2016	
		Name (type or print): Dr. James S Luckock P.A.				Title: President	
Processed 07/18/2016		* Electronically provided signatures are accepted as original signatures.					