

No. C 142104		Due no later than Jan 31, 2012		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. STANLEY MOGELSON, M.D., P.A. STANLEY MOGELSON 3527 TWIN FALLS GRADE KIMBERLY ID 83341 USA		STANLEY MOGELSON 3527 TWIN FALLS GRADE KIMBERLY ID 83341			
				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	STANLEY MOGELSON	3527 TWIN FALLS GRADE	KIMBERLY	ID	USA	83341	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID C 142104		Signature: Stanley Mogelson				Date: 11/05/2011	
		Name (type or print): Stanley Mogelson				Title: MD, presideent	
Processed 11/05/2011		* Electronically provided signatures are accepted as original signatures.					