

No. C 118608		Due no later than Mar 31, 2018		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. MATTHEWS CHIROPRACTIC, P.C. COREY MATTHEWS 403 S 11TH 110 BOISE ID 83702 USA		COREY MATTHEWS DC 403 S 11TH STE 110 BOISE ID 83702			
				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	
SECRETARY	ANDREA B MATTHEWS	1100 ARBOR ISLAND WAY	EAGLE	ID	USA	83616	
PRESIDENT	COREY MATTHEWS D.C.	403 S. 11TH #110	BOISE	ID	USA	83702	
5. Organized Under the Laws of: ID C 118608		6. Annual Report must be signed.* Signature: Corey Matthews, D.C. Date: 01/22/2018 Name (type or print): Corey Matthews, D.C. Title: President					
Processed 01/22/2018		* Electronically provided signatures are accepted as original signatures.					