

No. <b>C 113460</b>		<b>Due no later than Jan 31, 2011</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>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  TURNER CHIROPRACTIC, P.C. BRADLEY J TURNER 1736 ADDISON AVE E TWIN FALLS ID 83301		BRADLEY J TURNER 1736 ADDISON AVE E 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	
SECRETARY	RAQUEL D TURNER	3891 N 3600 E	KIMBERLY	ID	USA	83341	
PRESIDENT	BRADLEY J TURNER	3891 N 3600 E	KIMBERLY	ID	USA	83341	
5. Organized Under the Laws of:  <b>ID</b> <b>C 113460</b>		6. Annual Report must be signed.*  Signature: Raquel Turner Name (type or print): Raquel Turner  Date: 11/14/2011 Title: Secretary					
Processed 11/14/2011 * Electronically provided signatures are accepted as original signatures.							