


No. W 5041	Due no later than Nov 30, 2002 Annual Report Form	2. Registered Agent and Office 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 applicable IDAHO FALLS CHIROPRACTIC CLINIC, PL 1880 E 17TH ST IDAHO FALLS, ID 83404	ERIC ADAMS 1880 E 17TH ST IDAHO FALLS, ID 83404 3. New Registered Agent Signature																		
4. Limited Liability Companies: Enter Names and Addresses of Members. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 20%;"><u>Office held</u></th> <th style="text-align: left; width: 20%;"><u>Name</u></th> <th style="text-align: left; width: 30%;"><u>Street or P.O. Address</u></th> <th style="text-align: left; width: 15%;"><u>City</u></th> <th style="text-align: left; width: 10%;"><u>State</u></th> <th style="text-align: left; width: 5%;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>PRESIDENT</td> <td>ERIC ADAMS</td> <td>1880 E. 17th Street</td> <td>Idaho Falls,</td> <td>Idaho</td> <td>83404</td> </tr> <tr> <td>VICE PRES.</td> <td>DENISE BECKSTEAD</td> <td>1880 E. 17th Street</td> <td>Idaho Falls,</td> <td>ID</td> <td>83404</td> </tr> </tbody> </table>			<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	PRESIDENT	ERIC ADAMS	1880 E. 17th Street	Idaho Falls,	Idaho	83404	VICE PRES.	DENISE BECKSTEAD	1880 E. 17th Street	Idaho Falls,	ID	83404
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VICE PRES.	DENISE BECKSTEAD	1880 E. 17th Street	Idaho Falls,	ID	83404															
5. Organized Under the Laws of: IDAHO W 5041	6. <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> Signature  Name (Typed or Printed) <u>DENISE BECKSTEAD</u> </div> <div style="width: 35%;"> Date <u>9/7/02</u> Title <u>VICE PRESIDENT</u> </div> </div>																			