No. C 158877	Due no later than Feb 29, 2016	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form	KIMBERLY A MAZIK			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.	1014 BUSINESS PARK DR. SUITE A HAILEY ID 83333			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	HAILEY SPORT & SPINE PHYSICAL THERAPY, PA KIMBERLY A MAZIK PO BOX 5786	HAILET ID	MAILEY ID 63333		
	HAILEY ID 83333	3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE					
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 KIMBERLY A	MAZIK 1014 BUSINESS PARK DR. SUITE A	HAILEY	ID	USA	83333
5. Organized Under the Laws of:	6. Annual Report must be signed.*				
ID	Signature: KIMBERLY A MAZIK	Date: 12/21/2015			
C 158877	Name (type or print): KIMBERLY A MAZIK	Title: PRESIDENT			
Processed 12/21/2015	* Electronically provided signatures are accepted as original signatures.				