

No. C 121100	Due no later than Oct 31, 2016 Annual Report Form		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. STUTZMAN SPEECH AND LANGUAGE SERVICES, INC. SHAWNA MURPHY 3785 N 2538 E TWIN FALLS ID 83301		SHAWNA M STUTZMAN-MURPHY 3785 N 2538 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
PRESIDENT	SHAWNA MURPHY	3785 N 2538 E	TWIN FALLS	ID	USA	83301
5. Organized Under the Laws of: ID C 121100	6. Annual Report must be signed.* Signature: Shawna Murphy Name (type or print): Shawna Murphy		Date: 11/17/2016 Title: president			
Processed 11/17/2016		* Electronically provided signatures are accepted as original signatures.				