

No. C 116314	Due no later than Sep 30, 2015 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. MOBLEY PHYSICAL THERAPY, P.C. TRACY MOBLEY, M.S.,P.T. 151 E. MAIN RIGBY ID 83442	TRACY MOBLEY,M.S.,P.T. 151 E. MAIN RIGBY ID 83442	
		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
DIRECTOR	TRACY MOBLEY,M.S.,P.T.	151 E. MAIN	RIGBY ID USA 83442
5. Organized Under the Laws of: ID C 116314	6. Annual Report must be signed.* Signature: Betsy Cherry Name (type or print): Betsy Cherry		Date: 07/30/2015 Title: Office Manager
Processed 07/30/2015		* Electronically provided signatures are accepted as original signatures.	