No. <b>C 143866</b>		D	ue no later than May 31, 2017	2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  MOUNTAINVIEW FAMILY MEDICINE, INC.  NATALIE R HOUGHTON  2006 BIRDIE THOMPSON DR  POCATELLO ID 83201		2006 BIRDIE POCATELLO	BRADLEY M BURTON 2006 BIRDIE THOMPSON DR. POCATELLO ID 83201  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 VICE PRESIDENT	E EVAN HOLMSTEAD BRADLEY M BURTON		3515 SOMERSET 2176 W PORTNEUF RD	POCATELLO INKOM	ID ID	USA USA	83201 83245	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ъ		Signature: Natalie Houghton		D	Date: 04/13/2017			
C 143866		Name (type or print): Natalie Houghton		Т	Title: Office Manager			
Processed 04/13/2017	* Electronically provided signatures are accepted as original signatures.							