

No. <b>C 127297</b>		<b>Due no later than Jan 31, 2018</b>		<b>2. Registered Agent and Address (NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  WILLIAM F. MAY, M.D., P.A. WILLIAM F MAY 2750 SKYLINE DR TWIN FALLS ID 83301		WILLIAM F MAY MD 2750 SKYLINE DR 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	
SECRETARY	SHAUNA MAY	2750 SKYLINE DRIVE	TWIN FALLS	ID	USA	83301	
PRESIDENT	WILLIAM F MAY	2750 SKYLINE DRIVE	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of:  <b>ID C 127297</b>		6. Annual Report must be signed.* Signature: Shauna May Name (type or print): Shauna May Date: 01/03/2018 Title: Secretary					
Processed 01/03/2018		* Electronically provided signatures are accepted as original signatures.					