| No. <b>C 108261</b>   |   | Due no later than Nov 30, 2012 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.  IDAHO VISION CARE ASSOCIATION, INC.  RICHARD BUTLER  3090 GENTRY WAY SUITE 140  MERIDIAN ID 83642 |  | 3090 GENTR<br>MERIDIAN II | RICHARD BUTLER 3090 GENTRY WAY SUITE 140 MERIDIAN ID 83642  3. New Registered Agent Signature:* |         |             |  |
| NO FILING FEE IF RECEIVED BY DUE DATE   |   | A.I.I.  | 18: 17                                 |                           |   |         |             |  |
| 200   |   | ess Addresses of Presid   | ent, Secretary, and Directors. Treasur |                           |   |         |             |  |
| Office Held   |   |   | Street or PO Address                   | City                      | State   | Country | Postal Code |  |
| SECRETARY RICHARD BUTLER  |   | ЛLER  | 3090 GENTRY WAY SUITE 149              | MERIDIAN                  | ID  | USA     | 83642       |  |
| DIRECTOR JIM SWARTL   |   | LEY   | 999 N CURTIS SUITE 205                 | BOISE                     | ID  | USA     | 83706       |  |
| PRESIDENT MARK BORUP  |   | Р   | 999 N CURTIS RD STE 205                | BOISE                     | ID  | USA     | 83706       |  |
| 5. Organized Under the Laws of:   |   | 6. Annual Report must be signed.*   |  |                           |   |         |             |  |
| ID  |   | Signature: Richard I  |  | Date: 09/13/2012          |   |         |             |  |
| C 108261  |   | Name (type or print   | Title: Secetary                        |                           |   |         |             |  |
| Processed 09/13/2012  | ssed 09/13/2012 * Electronically provided signatures are accepted as original signatures. |   |  |                           |   |         |             |  |