No. C 152119		Due no later than Dec 31, 2014 Annual Report Form 1. Mailing Address: Correct in this box if needed. EAGLE EYE VISION SERVICES, P.A. ROY L. CLAPPER 1367 E SHOSHONE AVE ATHOL ID 83801-9819 USA		2. Registered	2. Registered Agent and Address (NO PO BOX) ROY L CLAPPER OD 1367 E SHOSHONE AVE ATHOL 83801-9819 3. New Registered Agent Signature:*			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE								
				200000000000000000000000000000000000000				
				3. <u>New</u> Regist				
4. Corporations: Enter	Names and Busin	ess Addresses of I	President, Secretary, and Directors. Treasu	rer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
TREASURER	ROY L. CLA	PPER	1367 E. SHOSHONE AVE.	ATHOL	ID	USA	83801-9819	
SECRETARY	ROY L. CLA	PPER	1367 E. SHOSHONE AVE.	ATHOL	ID	USA	83801-9819	
PRESIDENT	ROY L. CLA	PPER	1367 E. SHOSHONE AVE.	ATHOL	ID	USA	83801-9819	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Ro		Date: 10/16/2014				
C 152119		Name (type or		Title: President				
Processed 10/16/2014	1	* Electronically pr	ovided signatures are accepted as original	signatures.				