

No. <b>C 164278</b>	<b>Due no later than Jan 31, 2017</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(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>1. Mailing Address: Correct in this box if needed.</b> WIGHT CHIROPRACTIC, P.A. GARY C WIGHT 203 N HOLMES AVE IDAHO FALLS ID 83401		GARY CHRISTOPHER WIGHT 203 N HOLMES AVE IDAHO FALLS ID 83401			
			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	ERIN R WIGHT	2906 NORTH BLISS DRIVE	IDAHO FALLS	ID	USA	83401
PRESIDENT	GARY C WIGHT	203 NORTH HOLMES AVE	IDAHO FALLS	ID	USA	83401
5. Organized Under the Laws of:  <b>ID C 164278</b>	6. Annual Report must be signed.* Signature: Gary Wight Name (type or print): Gary Wight		Date: 01/07/2017 Title: President			
Processed 01/07/2017		* Electronically provided signatures are accepted as original signatures.				