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| No. C 146474 | | Due no later than Dec 31, 2015 Annual Report Form | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | 1. Mailing Address: Correct in this box if needed. STEPHEN M. SCHUTZ, M.D., P.A. STEPHEN M SCHUTZ 6259 W EMERALD ST BOISE ID 83704 | | STEPHEN M SCHUTZ 6259 W EMERALD ST BOISE ID 83704 | | | |
| | | | | | | 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 | ELISA SCHUTZ | 6259 W EMERALD STREET | BOISE | ID | USA | 83704 | |
| PRESIDENT | STEPHEN M SCHUTZ | 6259 W EMERALD STREET | BOISE | ID | USA | 83704 | |
| DIRECTOR | STEPHEN M SCHUTZ | 6259 W EMERALD STREET | BOISE | ID | USA | 83704 | |
| 5. Organized Under the Laws of: ID C 146474 | | 6. Annual Report must be signed.* Signature: Steven Farro Name (type or print): Steven Farro Date: 10/14/2015 Title: Administrator | | | | | |
| Processed 10/14/2015 * Electronically provided signatures are accepted as original signatures. | | | | | | | |