

No. <b>W 135906</b>	<b>Due no later than Mar 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> HAZELTREE MIDWIFERY PLLC KIMBERLY K PALMER, LM CPM 6456 W KAMLOOPS DR RATHDRUM ID 83858		KIMBERLY K PALMER, LM CPM 6456 W KAMLOOPS DR RATHDRUM ID 83858			
			3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MEMBER	KIMBERLY KAY PALMER, LM CPM	6456 W. KAMLOOPS DR.	RATHDRUM	ID	USA	83858
5. Organized Under the Laws of:  <b>ID</b> <b>W 135906</b>	6. Annual Report must be signed.* Signature: Kimberly Palmer Name (type or print): Kimberly Palmer		Date: 03/26/2017 Title: Owner			
Processed 03/26/2017		* Electronically provided signatures are accepted as original signatures.				