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|--|-------------------|--|-------|--|---------|-------------|--|
| No. C 129904 | | Due no later than Aug 31, 2017 | | 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. HOLLINGSHEAD EYE CENTER, P.C. MARK E. HOLLINGSHEAD, M.D. 360 E MALLARD DR STE 110 BOISE ID 83706 | | MARK E. HOLLINGSHEAD, M.D. 360 E MALLARD DR # 110 BOISE ID 83706 | | | |
| | | | | 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 | |
| TREASURER | LOUIS M PENNOW | 360 E MALLARD DR STE 110 | BOISE | ID | USA | 83706 | |
| SECRETARY | LANA HOLLINGSHEAD | 360 E MALLARD DR STE 110 | BOISE | ID | USA | 83706 | |
| 5. Organized Under the Laws of: ID C 129904 | | 6. Annual Report must be signed.* Signature: Louis M. Pennow Name (type or print): Louis M. Pennow Date: 06/22/2017 Title: Treasurer | | | | | |
| Processed 06/22/2017 | | * Electronically provided signatures are accepted as original signatures. | | | | | |