

No. <b>C 117570</b>	<b>Due no later than Dec 31, 2014</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> RICHARD E. HENRY, M.D., P.A. RICHARD E HENRY, MD 800 FALLS AVE STE 2 TWIN FALLS ID 83301 USA		RICHARD E HENRY 800 FALLS AVE STE 2 TWIN FALLS 83301			
			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
PRESIDENT	RICHARD E HENRY, MD	800 FALLS AVE, STE 2	TWIN FALLS	ID	USA	83301
SECRETARY	DEBRA J HENRY	800 FALLS AVE, STE 2	TWIN FALLS	ID	USA	83301
5. Organized Under the Laws of:  <b>ID C 117570</b>	6. Annual Report must be signed.* Signature: RICHARD E HENRY, MD Name (type or print): RICHARD E HENRY, MD		Date: 12/09/2014 Title: PRESIDENT			
Processed 12/09/2014		* Electronically provided signatures are accepted as original signatures.				