

No. C 112845

Due no later than December 31, 2008
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

PRICE CHIROPRACTIC CENTER, CHARTERED
DAVID N PRICE
9508 FAIRVIEW
BOISE, ID 83704DAVID N PRICE
9508 FAIRVIEW
BOISE, ID 83704NO FILING FEE IF
RECEIVED BY DUE DATE3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
PRESIDENT	DAVID N PRICE	9508 FAIRVIEW AVE	BOISE	IDAHO	83704
SECRETARY/ TREASURER	VALYNN PRICE	9508 FAIRVIEW AVE	BOISE	IDAHO	83704

5. Organized Under the Laws of:

IDAHO
C 112845

6.

Signature



Date

10/9/08

Name (Typed or Printed)

DAVID N PRICE

Title

President