



0005309551

**STATE OF IDAHO***Office of the secretary of state, Phil McGrane***ANNUAL REPORT**

Idaho Secretary of State  
 PO Box 83720  
 Boise, ID 83720-0080  
 (208) 334-2301  
 Filing Fee: \$0.00

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File #: 0005309551

Date Filed: 7/7/2023 10:59:04 AM

Entity Name and Mailing Address: <b>Entity Name:</b> BARNES PHYSICAL THERAPY, LLC <b>The file number of this entity on the records of the Idaho Secretary of State is:</b> 0000353701 <b>Address</b> PO BOX 306 <b></b> BLACKFOOT, ID 83221-0306								
<b>Entity Details:</b> <b>Entity Status</b> Active-Existing <b>This entity is organized under the laws of:</b> IDAHO <b>If applicable, the old file number of this entity on the records of the Idaho Secretary of State was:</b> W114996								
The registered agent on record is: <b>Registered Agent</b> <b>TREVOR BARNES</b> <b>Registered Agent</b> <b>Physical Address</b> <b>1250 W BRIDGE ST STE F</b> <b>BLACKFOOT, ID 83221</b> <b>Mailing Address</b>								
<b>Limited Liability Company Managers and Members</b> <table border="1"> <thead> <tr> <th>Name</th> <th>Title</th> <th>Business Address</th> </tr> </thead> <tbody> <tr> <td>Trevor G Barnes</td> <td>Manager</td> <td>PO BOX 306 BLACKFOOT, ID 83221</td> </tr> </tbody> </table>			Name	Title	Business Address	Trevor G Barnes	Manager	PO BOX 306 BLACKFOOT, ID 83221
Name	Title	Business Address						
Trevor G Barnes	Manager	PO BOX 306 BLACKFOOT, ID 83221						
The annual report must be signed by an authorized signer of the entity. <b>Job Title:</b> Owner								
<b>Trevor Barnes</b> <b>Sign Here</b>		<b>07/07/2023</b> <b>Date</b>						