

No. W 42699

**DUE NO LATER THAN SEP 30, 2008**  
**Annual Report Form**

2. Registered Agent and Office NO PO BOX

JEFFREY T GUNNELL DC  
742 E STATE ST STE 150  
EAGLE, ID 83616

3. New Registered Agent Signature

Return to:

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

**NO FILING FEE IF  
RECEIVED BY DUE DATE**

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

TREASURE VALLEY CHIROPRACTIC PLLC  
JEFFREY T GUNNELL DC  
742 E STATE ST STE 150  
EAGLE, ID 83616

4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.

Office held

Name

Street or P.O. Address

City

State

Zip

*Manager*

*Jeffrey T. Gunnell DC*

*3116 S. Avondale Ave*

*Idaho*

*ID*

*83686*

5. Organized Under the Laws of:

IDAHO  
W 42699

6.

Signature

*Jeffrey T. Gunnell DC*

Date *10-2-08*

Name (Typed or Printed)

*Jeffrey T. Gunnell DC*

Title *Manager*