

No. C 177281		Due no later than Feb 28, 2015 Annual Report Form		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. ACADIAN HERITAGE ANESTHESIA SERVICES, PA CASEY J JOHNSON 5931 W HIGHLAND DR COEUR D'ALENE ID 83814		CASEY JOHNSON 5931 W HIGHLAND DR COEUR D'ALENE 83814			
						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	CASEY J JOHNSON	5931 W. HIGHLAND DR.	COEUR D'ALENE	ID	USA	83814	
5. Organized Under the Laws of: ID C 177281		6. Annual Report must be signed.* Signature: Casey J Johnson Name (type or print): Casey J Johnson Date: 01/07/2015 Title: President					
Processed 01/07/2015 * Electronically provided signatures are accepted as original signatures.							