No. <b>C 121086</b>		Du	2. Registered	2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		10 Part   10 Par	T D WINBIGLER			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  EYE CARE ASSOCIATES OF EASTGATE, P.A.  ANGELA WINBIGLER  939 W. BEACON ST  BOISE ID 83706		BOISE ID	939 W. BEACON ST. BOISE ID 83706  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		DOISE ID 03	,,,,					
4. Corporations: Enter N	lames and Busin	ess Addresses of	President, Secretary, and Directors. Treas	urer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY PRESIDENT			939 W. BEACON 939 W. BEACON ST	BOISE BOISE	ID ID	USA USA	83706 83706	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 121086		Signature: Todd Winbigler			Date: 08/22/2014			
		Name (type or print): Todd Winbigler Title: President						
Processed 08/22/2014 * Electronically provided signatures are accepted as original signatures.								