

No. <b>C 131911</b>		<b>Due no later than Jan 31, 2016</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  LINDA D. BURKE, M.D., P.A. LINDA D BURKE 256 E BEACON LIGHT RD BOISE ID 83616		LINDA D BURKE 256 E BEACON LIGHT OWNER EAGLE ID 83616			
				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	LINDA D BURKE	256 E BEACON LIGHT RD	BOISE	ID	USA	83616	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID C 131911</b>		Signature: Linda D. Burke				Date: 12/03/2015	
		Name (type or print): Linda D. Burke				Title: President	
Processed 12/03/2015		* Electronically provided signatures are accepted as original signatures.					