No. C 196067		Due no later than Sep 30, 2015		2. Registered Age	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			GREGORY R KEESE MD 1107 W IRONWOOD DR COEUR D ALENE ID 83814			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. GREGORY R. KEESE, M.D., P.C. ANN POOLE 1107 W IRONWOOD DR COEUR D ALENE ID 83814						
				3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Nar	mes and Busin	ess Addresses of Pre	esident, Secretary, and Directors. Treasure	er (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	GREGORY R	KEESE	1107 W. IRONWOOD DRIVE	COEUR D ALENE	ID	USA	83814	
SECRETARY	GREGORY R	KEESE	1107 W. IRONWOOD DRIVE	COEUR D ALENE	ID	USA	83814	
PRESIDENT	GREGORY R	KEESE	1107 W. IRONWOOD DRIVE	COEUR D ALENE	ID	USA	83814	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 196067		Signature: Gregory R. Keese MD			Date: 07/21/2015			
		Name (type or print): Gregory R. Keese MD			Title: President			
Processed 07/21/2015	* Electronically provided signatures are accepted as original signatures.							