

No. C 145053	Due no later than Aug 31, 2018 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. JOEL JAROLIMEK, D.C., P.A. JOEL JAROLIMEK D.C., P.A. PO BOX 10044 KETCHUM ID 83340		JOEL JAROLIMEK 416 WARM SPRINGS RD KETCHUM ID 83340			
			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
SECRETARY	PAM JAROLIMEK	PO BOX 100444	KETCHUM	ID	USA	83340
PRESIDENT	JOEL JAROLIMEK	PO BOX 10044	KETCHUM	ID	USA	83340
5. Organized Under the Laws of: ID C 145053	6. Annual Report must be signed.* Signature: joel jarolimek dc pa Name (type or print): joel jarolimek dc pa		Date: 06/19/2018 Title: owner/doctor			
Processed 06/19/2018		* Electronically provided signatures are accepted as original signatures.				