

No. <b>C 187403</b>		<b>Due no later than Jun 30, 2017</b> <b>Annual Report Form</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>1. Mailing Address: Correct in this box if needed.</b>  CORPORATION FOR OBESITY PRACTITIONER EDUCATION KEITH P MCGUINNESS PO BOX 1492 EAGLE ID 83616		KEITH P MCGUINNESS 155 E BEACON LIGHT ROAD 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	
DIRECTOR	KEITH P MCGUINNESS	155 E. BEACON LIGHT RD	EAGLE	ID	USA	83616	
SECRETARY	KEITH P MCGUINNESS	155 E. BEACON LIGHT RD	EAGLE	ID	USA	83616	
PRESIDENT	KEITH P MCGUINNESS	155 E. BEACON LIGHT RD	EAGLE	ID	USA	83616	
5. Organized Under the Laws of:  <b>ID</b> <b>C 187403</b>		6. Annual Report must be signed.*  Signature: Keith McGuinness Name (type or print): Keith McGuinness					
		Date: 06/29/2017 Title: President					
Processed 06/29/2017      * Electronically provided signatures are accepted as original signatures.							