No. C 181176  Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Du	2. Registered Ag	2. Registered Agent and Address (NO PO BOX)  BRADLEY C WILLIAMS  790 HOLLYANN CT  TWIN FALLS ID 83301  3. New Registered Agent Signature:*			
		Annual Report Form  1. Mailing Address: Correct in this box if needed.  EVERGREEN PHYSICAL THERAPY INC BRADLEY C WILLIAMS 790 HOLLYANN CT TWIN FALLS ID 83301					
NO FILING FE RECEIVED BY DU 4. Corporations: Enter Na	E DATE	siness Addresses of	President, Secretary, and Directors. Trea	asurer (optional).			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
PRESIDENT	BRADLEY	C WILLIAMS	790 HOLLYANN COURT	TWIN FALLS	ID	USA	83301
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID C 181176		Signature: Br		Date: 10/26/2015			
		Name (type o	Name (type or print): Bradley Williams			Title: President	
Processed 10/26/2015		* Electronically p	rovided signatures are accepted as origir	nal signatures.			