No. C 140349	Due no later than August 31, 2004	2. Registered Agent and Office NO PO BO
Return to: SECRETARY OF STATE 700 WEST JEFFERSON	Annual Report Form 1. Mailing Address - Correct in this box, if applicable CHANDLER CHIROPRACTIC, P.A.	ROBERT C MONTGOMERY 2160 S TWIN RAPID WAY BOISE, ID 83709
PO BOX 83720 BOISE, ID 83720-0080	THAD CHANDLER 212 12TH AVE RD NAMPA, ID 83686	New Registered Agent Signature
NO FILING FEE IF RECEIVED BY DUE DATE		
4. Corporations: Enter Na	mes and Business Addresses of President, Secre	tary and Directors.
Office held Name	Street or P.O. Address	ty <u>State</u> Zip
President Thad Ch Socretary Kathy (ariale, 2000	mpa 1d 83686
5. Organized Under the Laws of: IDAHO	Signature The decided with a podler	1 Date 6-9-04
	6. Signature Lead Claud Name (Typed or Trad ('handler	1 Date 6-9-04 Title 10-9-04 2004083682