

No. C 121532	Due no later than Nov 30, 2015 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. INTERMOUNTAIN WEST ALLERGY ASSOCIATION, INC. RICHARD E HENRY 800 FALLS AVE STE 2 TWIN FALLS ID 83301		RICHARD E HENRY MD 800 FALLS AVE STE 2 TWIN FALLS ID 83301			
			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
PRESIDENT	GREGORY WICKERN	800 FALLS AVE, STE 2	TWIN FALLS	ID	USA	83301
SECRETARY	RON ENGLAND, MD	800 FALLS AVE, STE 2	TWIN FALLS	ID	USA	83301
DIRECTOR	CARL THORNBLADE	800 FALLS AVE, STE 2	TWIN FALLS	ID	USA	83301
DIRECTOR	RICHARD HENRY, MD	800 FALLS AVE, STE 2	TWIN FALLS	ID	USA	83301
5. Organized Under the Laws of: ID C 121532	6. Annual Report must be signed.* Signature: Richard E Henry, MD Name (type or print): Richard E Henry, MD		Date: 12/29/2015 Title: Director			
Processed 12/29/2015		* Electronically provided signatures are accepted as original signatures.				