No. C 160163		Due no later than Apr 30, 2009		2. Registered Ag	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		Annual Report Form 1. Mailing Address: Correct in this box if needed. SANDPOINT EYES, P.A. JULIE B. GAGNON 710 W SUPERIOR STE A SANDPOINT ID 83864 USA		710 W SUPER SANDPOINT	JULIE B GAGNON OD 710 W SUPERIOR STE A SANDPOINT ID 83864 3. New Registered Agent Signature:*			
4. Corporations: Enter Nam		ess Addresses of	President, Secretary, and Directors. Treasu	rer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
	MICHAEL R. GAGNON JULIE B. GAGNON		710 W. SUPERIOR STE. A 710 W. SUPERIOR STE. A	SANDPOINT SANDPOINT	ID ID	USA USA	83864 83864	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Ju		Date: 03/06/2009				
C 160163		Name (type o		Title: President				
Processed 03/06/2009	* Electronically provided signatures are accepted as original signatures.							