No. C 128513		Due no later than Apr 30, 2015		2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		R BARRY SAMS				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. SAMS' CHIROPRACTIC, P.C. ROBERT B SAMS 940 E CAROL MERIDIAN ID 83646		940 E CAROL MERIDIAN 83646 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE		USA						
4. Corporations: Enter Nan	nes and Busin	ess Addresses of	President, Secretary, and Directors. Tr	easurer (optional).			
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
PRESIDENT	IDENT ROBERT B SAI		940 E CAROL		MERIDIAN	ID	USA	83646
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Dr. R. B. Sams			Date: 02/18/2015			
C 128513		Name (type or print): Dr. R. B. Sams			Title: owner			
Processed 02/18/2015 * Electronically provided signatures are accepted as original signatures.								