

NO.

C106517

Annual Report Form

Due No Later Than November 30,

1997

Return to:

SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

NO FEE REQUIRED

* FIRST NOTICE *

1. Mailing Address - Please Correct, If Not Correct

GEHL CHIROPRACTIC, P.A.
MARSHA J GEHL
826 BLUE LAKES BLVD N

TWIN FALLS ID 83301

2. Registered Agent and Office NOT A P.O. BOX

MARSHA J GEHL
826 BLUE LAKES BLVD N
TWIN FALLS ID 83301

3. Organized Under the Laws of:

ID C106517

4. Corporations: Enter Names and Business Addresses of **President, Secretary and Directors**
Limited Liability Companies: Enter Names and Addresses of ☐ **Managers** or ☐ **Members** (check one)

Office heldNameStreet or P.O. AddressCityStateZip

PRESIDENT	MARSHA J. GEHL	826 BLUE LAKES	TWIN FALLS	ID	83301
SECRETARY	TAMMY LARSON	824 FALLS AVE.	TWIN FALLS	ID	83301
OFFICER	JASON STEPHENSON	4150 MEADOW RIDGE	TWIN FALLS	ID	83301

5.

6.

Signature

Date 7-14-97

Name (Typed or Printed)

MARSHA J. GEHL

Title PRESIDENT

ISSUED: 07-04-1997

DO NOT TAPE OR STAPLE

3090