

No. C 128897		Due no later than May 31, 2015		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. ALPINE COTTAGE CHIROPRACTIC, P.C. JOHN E WHALEN 1326 N MAIN ST MERIDIAN ID 83642 USA		JOHN E WHALEN 1326 N MAIN ST MERIDIAN 83642			
				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	JOHN E WHALEN	1326 N MAIN ST.	MERIDIAN	ID	USA	83642	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID C 128897		Signature: John Whalen				Date: 03/25/2015	
		Name (type or print): John Whalen				Title: President	
Processed 03/25/2015		* Electronically provided signatures are accepted as original signatures.					