No. C 200631		Due no later than Dec 31, 2014		2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. PETER L. TAYLOR, M.D., P.C. PETER L. TAYLOR PO BOX 3219 SUN VALLEY ID 83353-3219		PETER L TAYLOR MD 108 SUNRISE SUN VALLEY 83353 3. New Registered Agent Signature:*				
								NO FILING FEE IF RECEIVED BY DUE DATE
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).								
Office Held Na	ame		Street or PO Address		City	State	Country	Postal Code
PRESIDENT PE	ETER L. TA	AYLOR	PO BOX 3219		SUN VALLEY	ID	USA	83353
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Peter L. Taylor			Date: 11/20/2014			
C 200631		Name (type or print): Peter L. Taylor			Title: President			
Processed 11/20/2014 * Electronically provided signatures are accepted as original signatures.								