No. C 203682		Due no later than Oct 31, 2015		2. Regist	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			ROBERT L ROBINSON			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. SUMMIT THERAPY SERVICES CORPORATION 113 EAST AVE F JEROME ID 83338		JEROM	113 EAST AVE F JEROME ID 83338 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
2000 000 100		ess Addresses of Pre	sident, Secretary, and Directors. Treas					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY PRESIDENT	MARIKA ROBINSON ROBERT L ROBINSON		1013 GLEN EAGLE DR. 1013 GLEN EAGLE DR.	JEROME JEROME		USA USA	83338 83338	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 203682		Signature: Marika Robinson			Date: 08/21/2015			
		Name (type or print): Marika Robinson			Title: Secretary			
Processed 08/21/2015 * Electronically provided signatures are accepted as original signatures.								