No. <b>C 144549</b>		Due no later than Jul 31, 2015		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		AND AND DESCRIPTION OF THE PARTY OF THE PART	FOSTER CLINE MD			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  EVERGREEN CONSULTANTS WEST, P.C. FOSTER W CLINE MD 500 LAKEVIEW LANE SANDPOINT ID 83864 USA  ess Addresses of President, Secretary, and Directors. Treasurer		500 LAKEVIEW LANE SANDPOINT ID 83864-9481  3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE								
Office Held	Name	ess Addresses	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	FOSTER W.	CLINE	374 SUNNYSIDE UP PRESIDENT	SANDPOINT	ID	USA	83864-9481	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 144549		Signature:	Foster W. Cline		Date: 06/02/2015			
		Name (type		Title: President				
Processed 06/02/2015		* Electronically	provided signatures are accepted as original s	ignatures.				