

No. C 192377	Due no later than Sep 30, 2013 Annual Report Form	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	1. Mailing Address: Correct in this box if needed. BOISE SPINE SURGERY, P.A JOSEPH M VERSKA MD 7893 N VUE ESTATES MERIDIAN ID 83646	JOSEPH M VERSKA MD 7893 N VUE ESTATES MERIDIAN ID 83646	
		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	JOSEPH M VERSKA	7893 N VUE ESTATES	MERIDIAN ID USA 83646
5. Organized Under the Laws of: ID C 192377	6. Annual Report must be signed.* Signature: Joseph M. Veska Name (type or print): Joseph M. Veska		Date: 10/14/2013 Title: President
Processed 10/14/2013		* Electronically provided signatures are accepted as original signatures.	