No. <b>C 19370</b>		Due no later than Jun 30, 2012		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		JASON D WEST			
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.		1188 CALL CREEK DR POCATELLO ID 83201			
		IDAHO ASSOCIATION OF NATUROPATHIC PHYSICIANS, INC. (THE) LARRY V HICKS 677 FILER AVENUE, SUITE A POCATELLO ID 83201 USA					
				3. <u>New</u> Registered Agent Signature:*			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
PRESIDENT DIRECTOR	LARRY V HICKS GARRY SHOHET		677 FILER AVENUE SUITE A 2524 NORTH STOKESBERRY PLACE	TWIN FALLS BOISE	ID ID	USA USA	83318 89703
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID C 19370		Signature: Jdw		Date: 07/10/2012			
		Name (type or print): Jdw		Title: President			
Processed 07/10/201	2	* Electronically provide	ed signatures are accepted as original sign	natures.			