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ANNUAL REPORT

Domestic Business Corporation
SDCL 59-11-24, 24.1

South Dakota State Capitol
500 E. Capitol Ave
Pierre, SD 57501-5070
(605) 773-4845

2017
FILING YEAR

Please Type or Print Clearly in Ink
Please submit one Original
Make payable to the SECRETARY OF STATE

Filing Fee: \$50
Total Fee: \$50

1. Business ID and Name:

DB060514
BUSINESS ID

WHITEWOOD CREEK CHIROPRACTIC, PC
BUSINESS NAME

2. The jurisdiction under whose law it is formed SOUTH DAKOTA

3. The address of the principal executive office (business address):

Actual Street Address

**1001 MEADE STREET
WHITEWOOD, SD 57793**

Mailing Address

**1001 MEADE STREET
WHITEWOOD, SD 57793**

4. The South Dakota Registered Agent's Name:

South Dakota law permits the registered agent to be either (a) a noncommercial registered agent, (b) a commercial registered agent, or (c) an office holder.

(a) The South Dakota Noncommercial Registered Agent's name

Name **WILL JOHNSON**

Actual Street Address in this State

**1001 MEADE STREET
WHITEWOOD, SD 57793**

Mailing Address in this State

5. The names and business addresses of its principal officers.

Title	Name	Address
Secretary	Kylee A Johnson	1001 Meade St, Whitewood, SD, 57793

6. The names and business addresses of its directors (governors).

Name	Address
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7. Beneficial Owners (optional): A beneficial owner is a person who has or in some manner controls an equity security. Please consult an attorney for legal advice if you have any questions concerning this entry. Any question under this heading is considered a request for legal advice and the secretary of state's office is, by statute, not permitted, to provide legal advice.

No person may execute this report knowing it is false in any material respect. Any violation may be subject to a civil and/or criminal penalty (SDCL 47-1A-129; 22-39-36).

10/03/2017

Dated

Email (Optional)

Will Johnson

Signature of an Authorized Person

Will Johnson

Printed Name