No. C 142701	Due no later than February 29, 2008 Annual Report Form	2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 **NO FILING FEE IF RECEIVED BY DUE DATE**	1. Mailing Address - Correct in this box, if applicable BRIAN W. CHRISTENSEN M.D., P.A. 20 MADISON PROF PARK REXBURG, ID 83440	BRIAN W CHRISTENSEN 20 MADISON PROF PARK REXBURG, ID 83440 3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

Office held	Name	Street or P.O. Address	City	State	Zip
President / Treasurer	BRIAN W. CHRISTENSEN	20 MADISON PROFESSIONAL PARK	REXBURG	IDAHO	
Secretary	KARIE CHRISTENSEN	SAME AS ABOVE			

5. Organized Under the Laws of:
IDAHO
C 142701

6.
Signature _____ Date 12/17/07
Name (Typed or Printed) BRIAN CHRISTENSEN Title PRESIDENT

Issued 12/03/2007

Do Not Tape or Staple

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