No. W 24906

Due no later than July 31, 2006

Annual Report Form

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 applicable

Eric A Wingerson DO &
Digestive Health Center
1995 E 17th St., Suite #4
Idaho Falls, Id 83404

2. Registered Agent and Office **NO PO BOX**

WINSTON V BEARD
2105 CORONADO
IDAHO FALLS, ID 83404

3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Managers.

Office held	Name	Street or P.O. Address	City	State	Zip
Manager	ERIC A. WINGERSON, D.O.	1995 E. 17th St. Ste #4	Idaho Falls.	ID	83404

5. Organized Under the Laws of:
IDAHO
W 24906

6.
Signature _____ Date 5/16/06
Name (Typed or Printed) ERIC A. WINGERSON, DO Title Owner/Manager

Issued 05/01/2006

Do Not Tape or Staple

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