

No. W 37775		Due no later than Mar 31, 2016		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. PINNACLE HEALTH SYSTEMS, PLLC IRINTHA J HARRIS 1498 S. MIDWAY AVENUE SUITE 2 AMMON ID 83406		RICHARD NEW 1498 S. MIDWAY AVENUE SUITE 2 AMMON ID 83406			
				3. <u>New</u> Registered Agent Signature: *			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	RICHARD NEW	1498 S. MIDWAY AVENUE SUITE 2	IDAHO FALLS	ID	USA	83406	
MANAGER	KAYNE KISHIYAMA	1498 S. MIDWAY AVENUE SUITE 2	IDAHO FALLS	ID	USA	83406	
5. Organized Under the Laws of: ID W 37775		6. Annual Report must be signed.* Signature: Irintha Harris Name (type or print): Irintha Harris Date: 01/22/2016 Title: Office Manager					
Processed 01/22/2016		* Electronically provided signatures are accepted as original signatures.					