

No. W 4419	<b>Due no later than July 31, 2008 Annual Report Form</b>	<b>2. Registered Agent and Office NO PO BOX</b>
Return to: <b>SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080</b>	1. Mailing Address - Correct in this box, if applicable  <b>MEDICAL SERVICE ASSOCIATES, L.L.C. 393 E 2ND N REXBURG, ID 83440</b>	<b>C JEFFREY ZOLLINGER 393 E 2ND N REXBURG, ID 83440</b>
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>3. New Registered Agent Signature</b>	

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

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Pres.	Jeffrey Zollinger	950 Greenhaven	Rexburg	ID	83440
Vice Pres	Mary Zollinger	"	"	"	"
Sec.	John Holman	915 Greenhaven	Rexburg	ID	83440

5. Organized Under the Laws of:  <b>IDAHO W 4419</b>	6.  Signature <u>John Holman</u> Date <u>5-22-08</u>
	Name <small>(Typed or Printed)</small> <u>John Holman</u> Title <u>sec.</u>

Issued 05/02/2008

**Do Not Tape or Staple**

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