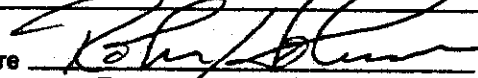


No. W 4419	Due no later than July 31, 2008 Annual Report Form 1. Mailing Address - Correct in this box, if applicable MEDICAL SERVICE ASSOCIATES, L.L.C. 393 E 2ND N REXBURG, ID 83440	2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID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

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

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

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