

No. W 22278		Due no later than January 31, 2008		2. Registered Agent and Office NO PO BOX	
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form		KAREN A THYKESON 136929 N MCCORMICK TRAIL HAYDEN, ID 83835	
NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address - Correct in this box, if applicable KAREN A. THYKESON, M.D., P.L.L.C. PO BOX 1090 HAYDEN, ID 83835		3. New Registered Agent Signature	
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>
member	Karen Thykeson	PO Box 1090	Hayden	ID	83835
5. Organized Under the Laws of: IDAHO W 22278		6. Signature <u>Karen Thykeson</u> Date <u>11-26-07</u> Name (Typed or Printed) <u>Karen Thykeson</u> Title <u>member</u>			

Issued 11/01/2007

Do Not Tape or Staple

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