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| No. W 18511 | | Due no later than Mar 31, 2016 Annual Report Form | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. MILLENNIUM PEDIATRIC ASSOCIATES, LLC Suzanne Nichols 100 E IDAHO ST STE 401 BOISE ID 83712 | | Suzanne Nichols 100 E IDAHO ST STE 401 BOISE ID 83712 | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | 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 | KHRISTINE D MILLER | 1620 CELEBRATION AVE | MERIDIAN | ID | 83642 | | |
| MANAGER | MINDY GADDIS | 450 W STATE STREET | EAGLE | ID | 83616 | | |
| 5. Organized Under the Laws of: ID W 18511 | | 6. Annual Report must be signed.* Signature: suzanne nichols Name (type or print): suzanne nichols | | | | | |
| | | Date: 01/18/2016 Title: agent | | | | | |
| Processed 01/18/2016 | | * Electronically provided signatures are accepted as original signatures. | | | | | |