

No. C 65280	Due no later than November 30, 2006 Annual Report Form		2. Registered Agent and Office 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	1. Mailing Address - Correct in this box, if applicable IDAHO CLINIC FOR OBSTETRICS & GYNEC PHILIP M. KRUEGER 811 N 6TH ST BOISE, ID 83702		PHILIP M. KRUEGER 811 N 6TH ST BOISE, ID 83702 3. New Registered Agent Signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td></td> <td>President Philip Krueger</td> <td>1311 Warm Springs</td> <td>Boise</td> <td>ID</td> <td>83712</td> </tr> <tr> <td></td> <td>Vice President Allyn Krueger</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip		President Philip Krueger	1311 Warm Springs	Boise	ID	83712		Vice President Allyn Krueger				
Office held	Name	Street or P.O. Address	City	State	Zip																
	President Philip Krueger	1311 Warm Springs	Boise	ID	83712																
	Vice President Allyn Krueger																				
5. Organized Under the Laws of: IDAHO C 65280		6. Signature <u>Philip M. Krueger</u> Date <u>11-21-06</u> Name (Typed or Printed) _____ Title _____																			

Issued 09/01/2006

Do Not Tape or Staple

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