

No. W 6876

Due no later than September 30, 2007
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:
SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

UPPER VALLEY ORTHOPEDICS PLLC
360 E MAIN
REXBURG, ID 83440

MICHAEL J LARSON
360 E MAIN
REXBURG, ID 83440

NO FILING FEE IF
RECEIVED BY DUE DATE

3. New Registered Agent Signature

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

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Member	Michael Larson	360 E. Main	Rexburg	ID	83440
Member	Kevin Lee	"	"	"	"

5. Organized Under the Laws of:

IDAHO
W 6876

6.

Signature

Date

7-11-07

Name

(Typed or
Printed)

Shauna Dunn

Title

Office Manager

Issued 07/02/2007

Do Not Tape or Staple

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