

No. C 165912		Due no later than Mar 31, 2013 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 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. MOUNTAIN WEST EAR NOSE AND THROAT, P.C. TRACY HANKS 3200 CHANNING WAY STE 303 IDAHO FALLS ID 83404		NATIONAL REGISTERED AGENTS INC 1423 TYRELL LANE BOISE ID 83706 USA			
						3. <u>New</u> Registered Agent Signature:*	
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors, Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
TREASURER	TRACY L HANKS	1582 ELK CREEK DRIVE	IDAHO FALLS	ID	USA	83404	
DIRECTOR	KEVIN M HANKS	1582 ELK CREEK DRIVE	IDAHO FALLS	ID	USA	83404	
SECRETARY	TRACY L HANKS	1582 ELK CREEK DRIVE	IDAHO FALLS	ID	USA	83404	
PRESIDENT	KEVIN M HANKS	1582 ELK CREEK DRIVE	IDAHO FALLS	ID	USA	83404	
5. Organized Under the Laws of: ID C 165912		6. Annual Report must be signed.* Signature: kEVIN HANKS Name (type or print): kEVIN HANKS					
		Date: 01/22/2013 Title: Owner					
Processed 01/22/2013 * Electronically provided signatures are accepted as original signatures.							