

No. W 10189		Due no later than Nov 30, 2016		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. EASTERN IDAHO MEDICAL CONSULTANTS, P.L.L.C. 2985 CORTEZ AVE STE 200 IDAHO FALLS ID 83404		BRADY L COOK 3200 CHANNING WAY STE 205 IDAHO FALLS ID 83404	
				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	SCOTT A TAYLOR	2985 CORTEZ AVE STE 200	IDAHO FALLS	ID	83404
5. Organized Under the Laws of: ID W 10189		6. Annual Report must be signed.* Signature: M Simpson Name (type or print): M Simpson Date: 12/20/2016 Title: Office Manager			
Processed 12/20/2016		* Electronically provided signatures are accepted as original signatures.			