No. C 44119	D	Due no later than Jul 31, 2011 2. Registered Agent and Address (NO PO BOX)					
Return to:		Annual Report Form	KIRSTEN GR	KIRSTEN GRUNZKE			
SECRETARY OF STATE	1. Mailing A	1. Mailing Address: Correct in this box if needed. BOISE SURGICAL GROUP, P.A. ATTN KIRSTEN GRUNZKE 3399 E LOUISE AVE STE 400 MERIDIAN ID 83642		3399 E LOUISE AVE STE 400 MERIDIAN ID 83642 3. New Registered Agent Signature:*			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	ATTN KIRSTE 3399 E LOUIS						
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Corporations: Enter Names and B	usiness Addresses of	President, Secretary, and Directors. Treasure	er (optional).				
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY KIRSTEN			MERIDIAN	ID	USA	83642	
	IN GILES	3399 E LOUISE AVE STE 400	MERIDIAN	ID	USA	83642	
PRESIDENT REESE A	VERNER	3399 E LOUISE AVE STE 400	MERIDIAN	ID	USA	83642	
5. Organized Under the Laws of: 6. Annual Report m		t must be signed.*					
ID Signature: Kirs		rsten Grunzke	Date: 05/19/2011				
C 44119 Name (type or		r print): Kirsten Grunzke	Title: Secretary/Practice Admin				
Processed 05/19/2011	* Electronically p	* Electronically provided signatures are accepted as original signatures.					