

|  |                     |   |             |   |         |             |  |
|--|---------------------|---|-------------|---|---------|-------------|--|
| No. <b>C 64234</b>   |                     | <b>Due no later than Jul 31, 2012</b>   |             | 2. Registered Agent and Address <b>(NO PO BOX)</b>            |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                     | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>SHOULDER AND KNEE CENTER PA<br>JOHN L. ANDARY<br>2035 EAST 17TH STREET<br>IDAHO FALLS ID 83404 |             | WINSTON V BEARD<br>2105 CORONADO<br>IDAHO FALLS ID 83404-7495 |         |             |  |
|  |                     |   |             | 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 |  |
| PRESIDENT  | JOHN L. ANDARY      | 2035 EAST 17TH STREET   | IDAHO FALLS | ID  | USA     | 83404       |  |
| SECRETARY  | KATHERINE M. ANDARY | 2035 EAST 17TH STREET   | IDAHO FALLS | ID  | USA     | 83404       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 64234</b>   |                     | 6. Annual Report must be signed.*<br>Signature: John L. Andary<br>Name (type or print): John L. Andary  |             |   |         |             |  |
|  |                     | Date: 05/23/2012<br>Title: President  |             |   |         |             |  |
| Processed 05/23/2012   |                     | * Electronically provided signatures are accepted as original signatures.   |             |   |         |             |  |