

No. <b>W 67405</b>		<b>Due no later than Oct 31, 2009</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  SOLARIS CLINICAL RESEARCH, LLC DAVID J BUTUK, MD 1525 E LEIGH FIELD DR #150 MERIDIAN ID 83646		DAVID BUTUK 2102 E HANDEL CT MERIDIAN ID 83646			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				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	
MEMBER	DAVID J BUTUK	1525 E LEIGH FIELD DR #150	MERIDIAN	ID	USA	83646	
MEMBER	YVETTE C BUTUK	1525 E LEIGH FIELD DR #150	MERIDIAN	ID	USA	83646	
5. Organized Under the Laws of:  <b>ID</b> <b>W 67405</b>		6. Annual Report must be signed.*  Signature: David Butuk Name (type or print): David Butuk					
		Date: 08/17/2009 Title: Member/Owner					
Processed 08/17/2009		* Electronically provided signatures are accepted as original signatures.					