No. <b>C 185629</b>		Due no later than Dec 31, 2010		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		MATTHEW	MATTHEW J LARSEN			
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.  COP 2 MD, P.C.  MATTHEW J LARSEN  712 PINE ST  FILER ID 83328		FILER ID	712 PINE ST FILER ID 83328  3. New Registered Agent Signature:*			
<ol><li>Corporations: Enter Na</li></ol>	mes and Busin	ess Addresses of Pr	esident, Secretary, and Directors. Tre	easurer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY PRESIDENT	YVONNE LARSEN MATTHEW J LARSEN		712 PINE STREET 712 PINE STREET	FILER FILER	ID ID	USA USA	83328 83328	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 185629		Signature: Matthew Larsen			Date: 10/20/2010			
		Name (type or p		Title: President				
Processed 10/20/2010		* Electronically pro	vided signatures are accepted as original	inal signatures.				