

No. C 122026		Reinstatement Annual Report Form ADMIN DISSOLVED 03/12/2012		2. Registered Agent and Office (NOT A P.O. BOX) MICHAEL J CARRAHER, M.D. 1300 E MULLAN Suite 1600 POST FALLS ID 83854																						
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00		1. Mailing Address: Correct in this box if needed. POST FALLS INTERNAL MEDICINE AND PEDIATRICS, PA MICHAEL J CARRAHER 1300 E MULLEN STE 1600 POST FALLS ID 83854		3. New Registered Agent Signature.																						
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.																										
<table border="1"><thead><tr><th>Office Held</th><th>Name</th><th>Street or PO Address</th><th>City</th><th>State</th><th>Country</th><th>Postal Code</th></tr></thead><tbody><tr><td>Secretary</td><td>Annette M. Bauman</td><td>1300 E. Mullan, Ste. 1600</td><td>Post Falls,</td><td>ID</td><td>USA</td><td>83854</td></tr><tr><td>President</td><td>Michael J. Carraher</td><td>1300 E. Mullan, Ste. 1600</td><td>Post Falls,</td><td>ID</td><td>USA</td><td>83854</td></tr></tbody></table>						Office Held	Name	Street or PO Address	City	State	Country	Postal Code	Secretary	Annette M. Bauman	1300 E. Mullan, Ste. 1600	Post Falls,	ID	USA	83854	President	Michael J. Carraher	1300 E. Mullan, Ste. 1600	Post Falls,	ID	USA	83854
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5. Organized Under the Laws of: IDAHO C 122026		6. <table border="1"><tr><td>Signature: <i>Michael J Carraher</i></td><td>Date: 3-27-12</td></tr><tr><td>Name (type or print): Michael J. Carraher</td><td>Title: President and</td></tr></table>				Signature: <i>Michael J Carraher</i>	Date: 3-27-12	Name (type or print): Michael J. Carraher	Title: President and																	
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Issued 03/27/2012 by SLD																										

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address.
Note: To ensure future mailings, the corrected address must be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; **not a Post Office Box or Personal Mail Box.**

Block 3: Only a new registered agent must sign in Block 3.

Block 4: Enter names and business addresses of president, secretary, and directors. **Note:** Do not put "same as last year" or "same as above". These will not be accepted.

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the corporation. Print or type the name of the signer below the signature.