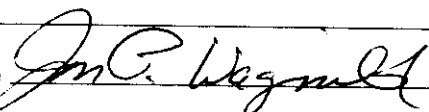


No. W 1591	Due no later than October 31, 2003 Annual Report Form		2. Registered Agent and Office NO PO BOX													
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address - Correct in this box, if applicable IDAHO NEPHROLOGY ASSOCIATES, P.L.L. JON P WAGNILD 5610 W GAGE STE A BOISE, ID 83706		JON P WAGNILD 5610 WEST GAGE STE A BOISE, ID 83706													
NO FILING FEE IF RECEIVED BY DUE DATE			3. <u>New</u> Registered Agent Signature													
4. Limited Liability Companies: Enter Names and Addresses of Members. <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Secretary</td> <td>Richard G. Smith</td> <td>877 Main St</td> <td>Boise</td> <td>Idaho</td> <td>83702</td> </tr> </tbody> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Secretary	Richard G. Smith	877 Main St	Boise	Idaho	83702
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
Secretary	Richard G. Smith	877 Main St	Boise	Idaho	83702											
5. Organized Under the Laws of: IDAHO W 1591		6. Signature  Date <u>8/12/03</u> Name (Typed or Printed) <u>Jon P. Wagnild, M.D.</u> Title <u>Owner</u>														