

No. W 87107	Due no later than Sep 30, 2010 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: 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. IDAHO SCOLIOSIS SPECIALISTS, PLLC SUSAN L CUNNINGHAM 10751 W OVERLAND R STE A #62 BOISE ID 83709 USA		SUSAN L CUNNINGHAM 3715 E OVERLAND R STE 105 MERIDIAN ID 83642			
			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
MANAGER	SUSAN L CUNNINGHAM	3715 E. OVERLAND RD. STE 105	MERIDIAN	ID	USA	83642
5. Organized Under the Laws of: ID W 87107	6. Annual Report must be signed.* Signature: Susan L. Cunningham Name (type or print): Susan L. Cunningham		Date: 09/29/2010 Title: Owner			
Processed 09/29/2010		* Electronically provided signatures are accepted as original signatures.				