

No. W 2386

Due no later than May 31, 2008

Annual Report Form

2. Registered Agent and Office NO PO BOX

GARY J MILLWARD DPM
1400 W BANNOCK ST
BOISE, ID 83702

3. New Registered Agent Signature

Return to:

SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

BOISE CENTER FOR FOOT SURGERY, P.L.
1400 W BANNOCK ST
BOISE, ID 83702

1828 S Millennium Way Ste 100
Meridian ID 83642

NO FILING FEE IF
RECEIVED BY DUE DATE

4. Limited Liability Companies: Enter Names and Addresses of Members.

Office held

Name

Street or P.O. Address

City

State

Zip

Partner Gary millward DPM 1828 S Millennium Way Ste 100 Meridian ID 83642
Partner Scott Grawet DPM
Phillip Burk DPM
Jeffrey Clendler DPM
Randy Lowe DPM
William Loveland MD

5. Organized Under the Laws of:

IDAHO
W 2386

6.

Signature

Date

3/20/08

Name

(Typed or Printed)

Shane P. Richs

Title

Administrator

200805005246

Issued 03/03/2008

Do Not Tape or Staple