No. <b>W 89234</b>		Due no later than Dec 31, 2015		2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  CLEARWATER MEDICAL PROPERTIES, LLC  JILL M BALL  1522 17TH ST  LEWISTON ID 83501		JOAN RICHARDSON 19795 TAMMANY CREEK RD LEWISTON ID 83501  3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Enter Nar		mes and Addresses	of at least one Member or Manage	r				
Office Held	Name	mes and made essec	Street or PO Address	•	City	State	Country	Postal Code
MANAGER	THERESA SMITH		110 W. 9TH STREET		KENDRICK	ID	USA	83537
5. Organized Under the Laws of:  ID  W 89234		6. Annual Report must be signed.* Signature: Jill Ball Name (type or print): Jill Ball			Date: 11/30/2015 Title: Office Manager			
Processed 11/30/2015 * Electronically provided signatures are accepted as original signatures.								