

No. <b>C 195477</b>	<b>Due no later than Jul 31, 2014</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b> J.F. LAMB, MD, P.C. JAROM F LAMB 775 POLE LINE RD W #212 TWIN FALLS ID 83301		JAROM F LAMB 775 POLE LINE RD W #212 TWIN FALLS ID 83301			
			3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
SECRETARY	JAMIE L LAMB	1337 SILVER CREEK WAY	TWIN FALLS	ID	USA	83301
PRESIDENT	JAROM F LAMB	1337 SILVER CREEK WAY	TWIN FALLS	ID	USA	83301
5. Organized Under the Laws of:  <b>ID C 195477</b>	6. Annual Report must be signed.* Signature: Jarom F. Lamb Name (type or print): Jarom F. Lamb		Date: 05/12/2014 Title: President			
Processed 05/12/2014		* Electronically provided signatures are accepted as original signatures.				