No. W 50300

Return to:
SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

NO FILING FEE IF RECEIVED BY DUE DATE

Due no later than May 31, 2007
Annual Report Form

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

MOUNTAIN MEDICAL BILLING, LLC
~~10166 ARROWLEAF CT~~ PO. BOX 623
STAR, ID 83669

2. Registered Agent and Office NO PO BOX

TIA MARIE FRISK
10114 ARROWLEAF CT
STAR, ID 83669

3. New Registered Agent Signature

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

Office held	Name	Street or P.O. Address	City	State	Zip
MANAGER	TIA M. FRISK	10114 Arrowleaf Ct	STAR	ID	83669

5. Organized Under the Laws of:
OREGON
W 50300

6.
Signature Tia M Frisk Date 3-8-07
Name (Typed or Printed) TIA FRISK Title OWNER

Issued 03/01/2007

Do Not Tape or Staple

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