

No. <b>C 167338</b>		<b>Due no later than Jun 30, 2009</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>  JONATHAN S. KING, M.D., P.C. ANN POOLEQ 1107 IRONWOOD DR COEUR D ALENE ID 83814		JONATHAN S KING 1107 IRONWOOD DR COEUR D'ALENE ID 83814			
				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	
TREASURER	JONATHAN S KING, M.D.	1107 IRONWOOD DRIVE	COEUR D ALENE	ID	USA	83814	
DIRECTOR	JONATHAN S KING, M.D.	1107 IRONWOOD DRIVE	COEUR D ALENE	ID	USA	83814	
SECRETARY	JONATHAN S KING, M.D.	1107 IRONWOOD DRIVE	COEUR D ALENE	ID	USA	83814	
PRESIDENT	JONATHAN S KING, M.D.	1107 IRONWOOD DRIVE	COEUR D ALENE	ID	USA	83814	
5. Organized Under the Laws of:  <b>ID C 167338</b>		6. Annual Report must be signed.* Signature: Jonathan S King, M.d. Name (type or print): Jonathan S King, M.d.  <div style="text-align: right;">           Date: 04/14/2009            Title: President         </div>					
Processed 04/14/2009		* Electronically provided signatures are accepted as original signatures.					