

No. W 21521

Due no later than November 30, 2007

Annual Report Form

2. Registered Agent and Office NO PO BOX

LOUIS KRAML
98 POPLAR ST
BLACKFOOT, ID 83221

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

MOUNTAIN RIVER BIRTHING AND SURGERY *
98 POPLAR ST
BLACKFOOT, ID 83221

*dba Idaho Doctor's Hospital

NO FILING FEE IF
RECEIVED BY DUE DATE

3. New Registered Agent Signature

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

Office held	Name	Street or P.O. Address	City	State	Zip
CEO	Louis Kraml	98 Poplar	Blackfoot	ID	83221
CFO	D. Jeffery Daniels	98 Poplar	"	"	"
COO	Layne Miller	98 Poplar	"	"	"

5. Organized Under the Laws of:
IDAHO
W 21521

6.

Signature

D. Jeffery Daniels

Date

9/10/07

Name (Typed or Printed)

D. Jeffery Daniels

Title

CFO

Issued 09/04/2007

Do Not Tape or Staple

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