

|  |                   |   |       |   |         |  |  |
|--|-------------------|---|-------|---|---------|--|--|
| No. <b>C 136748</b>  |                   | <b>Due no later than Dec 31, 2011</b><br><b>Annual Report Form</b>  |       | 2. Registered Agent and Address ( <b>NO PO BOX</b> )      |         |  |  |
| Return to:<br><br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                   | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>CHILDREN'S CRITICAL CARE OF IDAHO, P.C.<br>DAVID W CHRISTENSEN<br>PO BOX 170320<br>BOISE ID 83717-0320 |       | DAVID W CHRISTENSEN MD<br>190 E BANNOCK<br>BOISE ID 83712 |         |  |  |
|  |                   |   |       |   |         | 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                                |  |
| PRESIDENT  | DAVID CHRISTENSEN | PO BOX 170320   | BOISE | ID  | USA     | 83717-0320                                 |  |
| SECRETARY  | JANET CHRISTENSEN | PO BOX 170320   | BOISE | ID  | USA     | 83717-0320                                 |  |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>C 136748</b>  |                   | 6. Annual Report must be signed.*<br><br>Signature: Janet Christensen<br>Name (type or print): Janet Christensen  |       |   |         |  |  |
|  |                   | Date: 10/17/2011<br>Title: Secretary  |       |   |         |  |  |
| Processed 10/17/2011   |                   | * Electronically provided signatures are accepted as original signatures.   |       |   |         |  |  |