

No. W 17551

Due no later than December 31, 2007
Annual Report Form

2. Registered Agent and Office NO PO BOX

HENRY COVELLI
820 COLES LOOP RD
POST FALLS, ID 83854

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

COVELLI PULMONARY, L.L.C.
HENRY COVELLI
820 COLES LOOP RD
POST FALLS, ID 83854

3. New Registered Agent Signature

NO FILING FEE IF
RECEIVED BY DUE DATE

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

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Manager	Henry D Covelli	820 Coles Loop	POST FALLS	ID	83854

5. Organized Under the Laws of:
IDAHO
W 17551

6.

Signature

H. Covelli

Date

10/11/07

Name (Typed or Printed)

Henry D Covelli

Title

MANAGER