

No. **W 4950****Due no later than November 30, 2004
Annual Report Form**2. Registered Agent and Office **NO PO BOX**

Return to:

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

1 Mailing Address - Correct in this box, if applicable

GEM-STATE ANESTHESIA SERVICES, PLLC
~~MATTHEW J. WOOD~~ **JAMES L WARD**
1717 ARLINGTON AVE.
CALDWELL, ID 83605~~MATTHEW J. WOOD~~ **JAMES L. WARD**
1717 ARLINGTON AVE.
CALDWELL, ID 83605**NO FILING FEE IF
RECEIVED BY DUE DATE**

3. New Registered Agent Signature

James L Ward

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

Office held	Name	Street or P.O. Address	City	State	Zip
MANAGING PARTNER	JAMES L. WARD MD	1717 ARLINGTON	CALDWELL	ID	83605
PARTNER	MATTHEW WOOD MD	1717 ARLINGTON	CALDWELL	ID	83605
PARTNER	ROBERT TAYLOR MD	1717 ARLINGTON	CALDWELL	ID	83605

5. Organized Under the Laws of:

IDAHO
W 4950

6.

Signature

Name (Typed or Printed)

James L Ward MD Date *1/1/05*
JAMES LELAN WARD MD Title **MANAGING PARTNER**