


No. W 1754	Due no later than November 30, 2003 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address <small>Correct in this box, if applicable</small> KIDNEY PHYSICIANS OF IDAHO, L.L.C. JON WAGNILD MD 5610 W GAGE STE A BOISE, ID 83706	JON WAGNILD MD 5610 W GAGE ST STE A BOISE, ID 83706 3. <u>New</u> Registered Agent Signature

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

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	Jon P. Wagnild	5610 West Gage Ste A	Boise	ID	83706
Secretary	Micheal J. Adcox	"	"	"	"
Directors	Nagraj Narasimhan	"	"	"	"
	Michael C. Mallea	"	"	"	"

5. Organized Under the Laws of: <div style="text-align: center;">IDAHO W 1754</div>	6.  Signature _____ Date _____ Name <small>(Typed or Printed)</small> <u>Jon P. Wagnild</u> Title <u>Member</u>
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