

No. <b>W 42678</b>		<b>Due no later than Sep 30, 2012</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  BURR MEDICAL EQUIPMENT, LLC RANDALL D BURR 1618 S MILLENNIUM WAY STE 100 MERIDIAN ID 83642 USA		RANDALL BURR 1618 S MILLENNIUM WAY STE 100 MERIDIAN ID 83642			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address		City	State	Country	Postal Code
MANAGER	RANDALL BURR	1618 S. MILLENNIUM WAY STE 100		MERIDIAN	ID	USA	83642
5. Organized Under the Laws of:  <b>ID</b> <b>W 42678</b>		6. Annual Report must be signed.*  Signature: Randall Burr Name (type or print): Randall Burr  Date: 08/16/2012 Title: President					
Processed 08/16/2012      * Electronically provided signatures are accepted as original signatures.							