

No. **W 6294****Due no later than June 30, 2005
Annual Report Form**2. Registered Agent and Office **NO PO BOX**

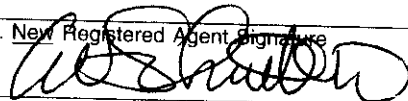
Return to:

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

1. Mailing Address - Correct in this box, if applicable

POST FALLS VISION CLINIC PLLC
ELWIN W SCHUTT OD
2525 E SELTICE WAY
POST FALLS, ID 83854ELWIN W SCHUTT OD
2525 E SELTICE WAY
POST FALLS, ID 83854**NO FILING FEE IF
RECEIVED BY DUE DATE**

3. New Registered Agent Signature



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

Office heldNameStreet or P.O. AddressCityStateZipPresident
manager

Elwin Schutt

2442 S. Schilling Loop

Post Falls

Id

83854

V.P.
member

Shirley Schutt

same
2442 S. Schilling Loop

Post Falls

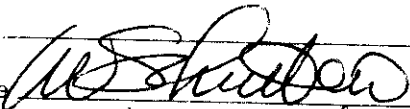
ID 83854

5. Organized Under the Laws of:

IDAHO
W 6294

6.

Signature



Date

4-14-05

Name (Type or Printed)

Elwin W. Schutt

Title

President

Issued 04/01/2005

Do Not Tape or Staple

200506001903