

No. W 26204	Due no later than October 31, 2005 Annual Report Form	2. Registered Agent and Office NO PO BOX JAMES M RETMIER MD 714 N COLLEGE #2 TWIN FALLS, ID 83301
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 - Correct in this box, if applicable INTERMOUNTAIN ORTHOPEDIC INVESTMENT 714 N COLLEGE #2 TWIN FALLS, ID 83301	3. New 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>
James Retmier	714 N College St	TF ID 83301
William May no	"	"
Blake Johnson no	"	"
Mark Wright no	"	"
5. Organized Under the Laws of: IDAHO W 26204		6. Signature <u>Melanie Kelly office manager</u> Date <u>8-10-05</u> Name (Typed or Printed) <u>Melanie Kelly</u> Title <u>office manager</u>

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Do Not Tape or Staple

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