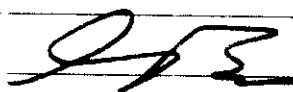
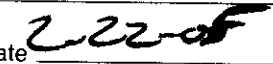


No. W 28574		Due no later than February 28, 2005		2. Registered Agent and Office NO PO BOX	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form		DAVID BOWMAN 329 S WOODRUFF IDAHO FALLS, ID 83401	
NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address - Correct in this box, if applicable URGENT CARE, PLLC 3740 HIDDEN HAVEN <i>329 S Woodruff Ave</i> IDAHO FALLS, ID 83406 <i>83401</i>		3. <u>New</u> Registered Agent Signature	
4. Limited Liability Companies. Enter Names and Addresses of Managers.					
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
MANAGER:	DAVID BOWMAN	740 SOUTH WOODRUFF AVE	IDAHO FALLS,	ID	83401
MANAGER:	KIMBERLY BOWMAN	740 SOUTH WOODRUFF AVE	IDAHO FALLS,	ID	83401
5. Organized Under the Laws of:		6.			
IDAHO W 28574		Signature 		Date 	
		Name <small>(Type or Print)</small>		Title	

Issued 12/01/2004

Do Not Tape or Staple

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