No. <b>C 74499</b>		1	Due no later than Dec 31, 2012	2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  GREGORY J. KADLEC, M.D., P.A. GREGORY J KADLEC, M.D. 800 FALLS AVE STE 2 TWIN FALLS ID 83301		800 FALLS AV TWIN FALLS	G. J. KADLEC, M.D. 800 FALLS AVE STE 2 TWIN FALLS ID 83301  3. New Registered Agent Signature:*			
NO FILING F RECEIVED BY D 4. Corporations: Enter N	UE DATE	ness Addresses (	of President, Secretary, and Directors. Treas	surer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	GREGORY J	KADLEC	800 FALLS AVE, SUITE 2	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 74499		Signature:		Date: 11/01/2012				
		Name (type or print): Gregory J Kadlec			Title: President			
Processed 11/01/2012	_	* Electronically	provided signatures are accepted as origina	al signatures.			_	