

No. <b>C 166372</b>		<b>Due no later than Apr 30, 2010</b>		<b>2. Registered Agent and Address (NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  MEADOW LAKE SURGERY CENTER, INC. MARK D WIGOD MD 7157 N SPURWING WAY MERIDIAN ID 83642		MARK K WIGOD 7157 N SPURWING WAY MERIDIAN ID 83642			
				3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
SECRETARY	KIMBERLY M WIGOD	7157 N SPURWING WAY	MERIDIAN	ID	USA	83646	
PRESIDENT	MARK D WIGOD	7157 N SPURWING WAY	MERIDIAN	ID	USA	83646	
5. Organized Under the Laws of:  <b>ID C 166372</b>		6. Annual Report must be signed.* Signature: Kimberly M. Wigod Name (type or print): Kimberly M. Wigod Date: 05/06/2010 Title: Secretary					
Processed 05/06/2010		* Electronically provided signatures are accepted as original signatures.					