

No. **W 12237**

**Due no later than Jun 30, 2001
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

~~PO BOX 7805~~ **1425 W. RIVER STREET**

~~BOISE, ID 83700~~ **83702**

DAVID M LAMEY, MD
~~1075 N CURTIS RD STE 300~~
1425 W. RIVER ST
~~BOISE, ID 83707~~ **83702**

3. New Registered Agent Signature

**NO FILING FEE IF
RECEIVED BY DUE DATE**

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>
Managing member	David M. Lamey, MD	1425 W. RIVER STREET	BOISE	ID	83702

5. Organized Under the Laws of:

IDAHO
W 12237

6.

Signature

Date

4/6/01

Name (Typed or Printed)

DAVID M. LAMEY, MD

Title:

MANAGING MEMBER

~~XXXX~~