No. <b>C 45733</b>		Due no later than Jul 31, 2009		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			MICHAEL TULLIS 333 N 1ST ST STE 280 BOISE ID 83702  3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	700 WEST JEFFERSON PO BOX 83720		1. Mailing Address: Correct in this box if needed.  CARDIOVASCULAR & CHEST SURGICAL ASSOCIATES, P.A.  333 NORTH FIRST, #280  BOISE ID 83702					
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Regist	erea rigent of	gridianei		
4. Corporations: Enter Name	es and Busine	ess Addresses of P	resident, Secretary, and Directors. Treasu	ırer (optional).				
Office Held N	Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY A	JEFFREY J GILBERTSON ANDREW D FORBES MICHAEL J TULLIS		333 N 1ST ST. #280 333 N 1ST ST. #280 333 N 1ST ST. #280	BOISE BOISE BOISE	ID ID ID	USA USA USA	83702 83702 83702	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 45733		Signature: Mich		Date: 05/15/2009				
		Name (type or print): Michael J Tullis  * Electronically provided signatures are accepted as original signatures.						