

No. W 42549

Return to:

SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

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

**Due no later than September 30, 2006
Annual Report Form**

1. Mailing Address - Correct in this box, if applicable

NORTH IDAHO PAIN CENTER, LLC
SCOTT K MAGNUSON MD
2003 LINCOLN WAY
COEUR D'ALENE, ID 83814

2. Registered Agent and Office NO PO BOX

SCOTT K MAGNUSON MD
1800 E MULLAN STE 800
POST FALLS, ID 83854
2003 Lincoln Way #310
Coeur d'Alene, ID 83814

3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Members.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Owner	Scott Magnuson	2003 Lincoln Way #310	Coeur d'Alene	ID	83814

5. Organized Under the Laws of:

IDAHO
W 42549

6.

Signature

Name (Typed or
Printed)

Scott A. Magnuson Date 8/16/06

Michele A. Magnuson Title Office manager