

No. W 16312		Due no later than Aug 31, 2014 Annual Report Form		2. Registered Agent and Address (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 needed. MOUNTAIN VIEW-MPT HOSPITAL, LLC CASSIE D CATES 1000 URBAN CENTER DR STE 501 BIRMINGHAM AL 35242 USA		CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713 USA		
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*		
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER	HEALTH CARE PROPERTY INVESTORS INC	3760 KILROY AIRPORT WAY #300	LONG BEACH	CA	USA	90806
MEMBER	MPT OF IDAHO, LLC	1000 URBAN CENTER DRIVE SUITE 501 BIRMINGHAM		AL	USA	35242-2225
5. Organized Under the Laws of: DE W 16312		6. Annual Report must be signed.* Signature: Cassie Cates Name (type or print): Cassie Cates				
		Date: 08/07/2014 Title: Tax Manager				
Processed 08/07/2014 * Electronically provided signatures are accepted as original signatures.						