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FILED EFFECTIVE

REINSTATEMENT

2. Registered Agent and Office NOT A P.O. BOX **Annual Report Form** No. C 62905 ADMIN DISSOLVED 04/07/2004 JAMES T. ANNEST, M.D. **POTA MOUNTAIN VIEW CIP** Return to: 1. Mailing Address - Correct in this box, it applicable SECRETARY OF STATE 285 Frazier Ct. TWIN FALLS, ID 83301 JAMES T. ANNEST, M.D., P.A. 700 WEST JEFFERSON JAMES T. ANNEST, M.D. PO BOX 83720 BOISE, ID 83720-0080 2814 MOUNTAIN VIEW CIROLE 285 Frazier Ct. 3: New registered agent signature FEE DUE \$30.00 TWIN FALLS, ID 83301 new odders Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of management. Limited and Limited Liability Partnerships: Enter names and addresses of at least two (2) partners. Zip CIty Street or P.O. Address Name Office held 83301 285 Frazier Ct. Twin Falls James T. Annest, M.D President. Ö 5. Organized under the laws of: Date Signature IDAHO Name [Times or James T. Annest, M.D. Title President C 62905 Issued 01/10/2007 by LJG