

No. W 3842	Due no later than Apr 30, 2001 Annual Report Form	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address - Correct in this box, if applicable A. DALE GULLEDGE, M.D., PLLC A DALE GULLEDGE 4969 N HOLLOWLN 3719 W. QUAIL BOISE, ID 83702 83703 H E I G H T S C O U R T	
NO FILING FEE IF RECEIVED BY DUE DATE	2. Registered Agent and Office NO PO BOX A DALE GULLEDGE 4969 N HOLLOWLN 3719 W. QUAIL HTS. BOISE, ID 83702 83703 CT.	
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>
member manager	A. Dale Gullledge	3719 W. QUAIL HTS. COURT
		<u>City</u> <u>BOISE</u>
		<u>State</u> <u>ED</u>
		<u>Zip</u> <u>83703</u>
5. Organized Under the Laws of:		
IDAHO W 3842	6. Signature <u>A. Dale Gullledge</u> Name (Typed or Printed) <u>A. Dale Gullledge</u> Date <u>May 15, 2001</u> Title: <u>Manager</u> <u>Xxxxx</u> <u>Member</u>	

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Do Not Tape or Staple