

No. W 96190	Due no later than Sep 30, 2011 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. EMERGENCY OTOLARYNGOLOGY SERVICES, PLLC MICHAEL J WHYTE 2635 CHANNING WAY IDAHO FALLS ID 83404	MICHAEL J WHYTE 2635 CHANNING WAY IDAHO FALLS ID 83404				
		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
MEMBER	DANIEL K HINCKLEY	2065 E 17TH STREET SUITE A	IDAHO FALLS	ID	USA	83404
5. Organized Under the Laws of: ID W 96190	6. Annual Report must be signed.* Signature: Michael J. Whyte Name (type or print): Michael J. Whyte Date: 07/18/2011 Title: Registered agent					
Processed 07/18/2011		* Electronically provided signatures are accepted as original signatures.				