

No. C 146909

Due no later than December 31, 2007
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:
SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

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

IDAHO SOCIETY OF INTERVENTIONAL PAIN
301 W MYRTLE
BOISE, ID 83702

WILLIAM G BINEGAR
301 W MYRTLE
BOISE, ID 83702

NO FILING FEE IF
RECEIVED BY DUE DATE

3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	William G Binegar MD	301 W Myrtle	Boise,	ID	83702

5. Organized Under the Laws of:

DELAWARE
C 146909

6.

Signature

Date

10/12/07

Name (Type or Printed)

William G Binegar MD

Title

President

Issued 10/01/2007

Do Not Tape or Staple

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