

No. C 100671		Due no later than Jan 31, 2013		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. SHAUNA T. WILLIAMS, M.D., P.A. SHAUNA T WILLIAMS MD 1072 N. LIBERTY ST. SUITE 201 BOISE ID 83704 USA		SHAUNA T WILLIAMS MD 1072 N. LIBERTY ST. SUITE 201 BOISE ID 83704			
				3. <u>New</u> Registered Agent Signature: *			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	RICHARD WILLIAMS	1072 N. LIBERTY ST. SUITE 201	BOISE	ID	USA	83706	
DIRECTOR	SHAUNA T WILLIAMS	1072 N. LIBERTY ST. SUITE 201	BOISE	ID	USA	83704	
SECRETARY	RICHARD WILLIAMS	1072 N. LIBERTY ST. SUITE 201	BOISE	ID	USA	83704	
PRESIDENT	SHAUNA T WILLIAMS	1072 N. LIBERTY ST. SUITE 201	BOISE	ID	USA	83704	
5. Organized Under the Laws of: ID C 100671		6. Annual Report must be signed.* Signature: Connie Merrell Name (type or print): Connie Merrell Date: 11/13/2012 Title: Office Manager					
Processed 11/13/2012		* Electronically provided signatures are accepted as original signatures.					