

|  |  |   |   |       |         |             |
|--|--|---|---|-------|---------|-------------|
| No. <b>W 116066</b>  | <b>Due no later than Jul 31, 2015</b><br><b>Annual Report Form</b>   |   | 2. Registered Agent and Address <b>(NO PO BOX)</b>      |       |         |             |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> | <b>1. Mailing Address: Correct in this box if needed.</b><br>J C HOSPITALISTS, PLLC<br>CAPITOL LAW GROUP<br>PO BOX 2598<br>BOISE ID 83701<br>USA |   | ALLAN R BOSCH<br>205 N 10TH ST 4TH FL<br>BOISE ID 83702 |       |         |             |
|  |  |   | 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   | JULIE D LYON   | 13960 W. WAINWRIGHT   | BOISE   | ID    | USA     | 83713       |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 116066</b>  |  | 6. Annual Report must be signed.*<br>Signature: J. Lyon<br>Name (type or print): J. Lyon<br>Date: 05/21/2015<br>Title: member |   |       |         |             |
| Processed 05/21/2015   |  | * Electronically provided signatures are accepted as original signatures.   |   |       |         |             |