

No. **J 890****Due no later than June 30, 2006****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**NAMPA MEDICAL PROPERTIES, LLP
215 E HAWAII AVE
NAMPA, ID 836862. Registered Agent and Office **NO PO BOX**~~MICHAEL DEE MD~~ *Harold Kunz MD*
215 E HAWAII AVE
NAMPA, ID 83686

3. New Registered Agent Signature

*Harold Kunz MD***NO FILING FEE IF
RECEIVED BY DUE DATE****4. Limited Liability Partnerships: Enter Names and Business Addresses of two (2) or more partners.**

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	Harold Kunz	215 E. Hawaii Ave	Nampa	ID	83686
Secretary	John Kaiser	215 E. Hawaii Ave	Nampa	ID	83686

5. Organized Under the Laws of:

IDAHO
J 890

6.

Signature

Harold Kunz

Date

5/18/06

Name (Typed or Printed)

Harold Kunz MD

Title

President

Issued 04/03/2006

Do Not Tape or Staple

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