

No. C 45730		Due no later than Jul 31, 2006		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. CARDIOVASCULAR CLINIC, CHARTERED DONALD K. STOTT, M.D. 3025 W CHERRY LN STE 204 MERIDIAN ID 83642 USA		DONALD K STOTT MD PA 3025 W CHERRY LN STE 204 MERIDIAN ID 83642		
				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
SECRETARY	SUSAN LYNN STOTT	1591 S. RIVER GROVE WAY	EAGLE	ID	USA	83616
PRESIDENT	DONALD KENNETH STOTT	1591 S. RIVER GROVE WAY	EAGLE	ID	USA	83616
5. Organized Under the Laws of: IDAHO C 45730		6. Annual Report must be signed.* Signature: DONALD K. STOTTMD Name (type or print): DONALD K. STOTTMD Date: 08/14/2006 Title: PRESIDENT				
Processed 08/14/2006		* Electronically provided signatures are accepted as original signatures.				