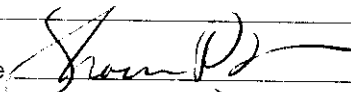


No. W 6876	Due no later than September 30, 2004 Annual Report Form		2. Registered Agent and Office NO PO BOX		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable UPPER VALLEY ORTHOPEDICS PLLC 360 E MAIN REXBURG, ID 83440		MICHAEL J LARSON 360 E MAIN REXBURG, ID 83440 3. <u>New</u> Registered Agent Signature		
4. Limited Liability Companies: Enter Names and Addresses of Members.					
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
owner	Michael J Larson	360 East Main	Rexburg	ID	83440
owner	Kevin A Lee	"	"	"	"
5. Organized Under the Laws of: IDAHO W 6876		6. Signature  Date 7-15-04 Name (Typed or Printed) <u>Shaun Dunn</u> Title <u>Office Manager</u>			

Issued 07/01/2004

Do Not Tape or Staple

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