	Due no later than Nov 30, 2002	2. Registered Agent and Office NO PO BOX
No. J 890	Annual Report Form	MICHAEL DEE MD
Return to:	Mailing Address - Correct in this box, if applicable	215 E HAWAII AVE
SECRETARY OF STATE 700 WEST JEFFERSON	NAMPA MEDICAL PROPERTIES, LLP	
PO BOX 83720		NAMPA, ID 83686
BOISE, ID 83720-0080	215 E HAWAII AVE	a vi Danistanad Agost Signature
	NAMPA, ID 83686	3. New Registered Agent Signature
NO FILING FEE IF	NAMIPA, ID 83000	
RECEIVED BY DUE DATE	iiiiiii _	
 Limited Liability Partners 	ships: No further information is reqired.	Otata Zin
Office held Name	Street or P.O. Address City	<u>State</u> <u>Zip</u>
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5 Organized Linder the Laws of:	6.	2-21-07
5. Organized Under the Laws of:		Date
IDAHO	Signature ***	Partner
	Signature ***	
IDAHO		Partner