No. C 122184		The state of the s		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. ASSOCIATED INTERNAL MEDICINE, P.A. BRADLEY FOWLER 2207 IRONWOOD PL COEUR D'ALENE ID 83814 3. New Registered Agent Signature		2207 IRONWOOD PL			
4. Corporations: Enter Na	mes and Busin			ess Addresses of Preside	ent, Secretary, and Directors. Treasure	r (optional).	
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
PRESIDENT	SUSAN M D	DAUGHARTY-FOWLER	2207 IRONWOOD PLACE	COEURDALENE	ID	USA	83814
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID C 122184		Signature: Bradley Fowler		Date: 02/28/2011			
		Name (type or print)	Title: Treasurer				
Processed 02/28/2011		* Electronically provided signatures are accepted as original signatures.					