

No. C 180247	Due no later than Sep 30, 2016 Annual Report Form		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	1. Mailing Address: Correct in this box if needed.		BRENT CHERNE 4465 W MORGAN CREEK CT EAGLE ID 83616			
	SURGICAL DEVELOPMENT GROUP, INC. BRENT CHERNE 4465 W MORGAN CREEK CT EAGLE ID 83616		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
PRESIDENT	BRENT CHERNE	4465 W MORGAN CREEK CT	EAGLE	ID	USA	83616
SECRETARY	SHERYL CHERNE	4465 W MORGAN CREEK CT	EAGLE	ID	USA	83616
5. Organized Under the Laws of: IN C 180247	6. Annual Report must be signed.*					
		Signature: Sheryl Cherne	Date: 07/29/2016			
		Name (type or print): Sheryl Cherne	Title: Secretary			
Processed 07/29/2016		* Electronically provided signatures are accepted as original signatures.				