No. C 177145		Due no later than Feb 28, 2010		2. Registered	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. MICHAEL J. CURTIN, M.D., P.C. PAULETTE M CARLSON 600 N ROBBINS RD STE 401		600 N ROI BOISE ID	MICHAEL J CURTIN MD 600 N ROBBINS RD STE 401 BOISE ID 83702 3. New Registered Agent Signature:*			
RECEIVED BY DUE DATE 4. Corporations: Enter Names and Busine			dent Secretary and Directors Treasur	er (ontional)				
Office Held	Name	ess Addresses of Fresid	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT MICHAEL J CURTIN		CURTIN	INTERMOUNTAIN ORTHOPAEDICS N. ROBBINS ROAD, STE 401	600 BOISE	ID	USA	83702-4566	
5. Organized Under the Laws of: ID C 177145		6. Annual Report must be signed.* Signature: Paulette M. Carlson Name (type or print): Paulette M. Carlson			Date: 12/16/2009 Title: Administrative Assistant			
Processed 12/16/2009 * Electronically provided signatures are accepted as original signatures.								