

No. C 108735

Due no later than December 31, 2008
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:
SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

IDAHO NEUROLOGICAL SURGERY, P.A.
222 N 2ND ST SUITE 307
BOISE, ID 83702

DOUGLAS E SMITH
STE 307 222 N 2ND ST
BOISE, ID 83702

NO FILING FEE IF
RECEIVED BY DUE DATE

3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
PRESIDENT	DOUGLAS E. SMITH	222 N. 2ND STREET, SUITE 307	BOISE	ID	83702

5. Organized Under the Laws of:

IDAHO
C 108735

6.

Signature Douglas E. Smith Date 10/17/08

Name (Typed or Printed) DOUGLAS E. SMITH Title PRESIDENT