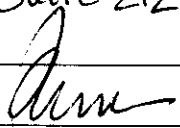


No. W 4988	Due no later than November 30, 2005 Annual Report Form		2. Registered Agent and Office NO PO BOX STEPHEN W ASHER MD 222 N 2ND AVE STE 212 BOISE, ID 83702
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable NEUROLOGICAL OFFICE MANAGEMENT, LLC STEPHEN W ASHER MD 222 N 2ND AVE STE 212 BOISE, ID 83702		3. <u>New</u> Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Managers.

Office held	Name	Street or P.O. Address	City	State	Zip
Manager	Stephen W Asher, MD	222 N. 2nd St. Suite 212	Boise	ID	83702
Manager	Allen C. Han, M.D.	222 N. 2nd St. Suite 212	Boise	ID	83702
Manager	Martha A. Cline, M.D.	222 N. 2nd St. Suite 212	Boise	ID	83702

5. Organized Under the Laws of: IDAHO W 4988	6. Signature  Date <u>9/2/05</u> Name (Typed or Printed) <u>Stephen W Asher, M.D.</u> Title <u>Manager</u>
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