

No. C 117273		Due no later than Nov 30, 2010		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		Annual Report Form		JULIA FOLLOW 2188 ADDISON AVE E TWIN FALLS ID 83301			
		1. Mailing Address: Correct in this box if needed. SOUTHERN IDAHO PAIN INSTITUTE, P.C. DENISE S RUE 236 MARTIN ST TWIN FALLS ID 83301 USA		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	
SECRETARY	DENISE S RUE	236 MARTIN STREET	TWIN FALLS	ID	USA	83301	
PRESIDENT	CLINTON L DILLE	236 MARTIN ST	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID C 117273		Signature: Denise S Rue			Date: 10/18/2010		
		Name (type or print): Denise S Rue			Title: Office Manager		
Processed 10/18/2010		* Electronically provided signatures are accepted as original signatures.					