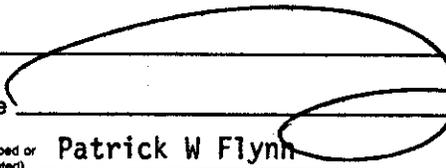


<b>No. W 1855</b>	<b>Due no later than December 31, 2006 Annual Report Form</b>		<b>2. Registered Agent and Office NO PO BOX</b>													
<b>Return to:</b> SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address - Correct in this box, if applicable</b>  ANESTHESIA ASSOCIATES OF COEUR D'AL PATRICK W FLYNN 1705 GOVERNMENT WAY COEUR D'ALENE, ID 83814		PATRICK W FLYNN 1705 GOVERNMENT WAY COEUR D'ALENE, ID 83814  <b>3. New Registered Agent Signature</b>													
<b>4. Limited Liability Companies: Enter Names and Addresses of Managers.</b> <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Manager</td> <td>Patrick W Flynn</td> <td>1705 Government Way</td> <td>Coeur d'Alene</td> <td>Idaho</td> <td>83814</td> </tr> </tbody> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Manager	Patrick W Flynn	1705 Government Way	Coeur d'Alene	Idaho	83814
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
Manager	Patrick W Flynn	1705 Government Way	Coeur d'Alene	Idaho	83814											
<b>5. Organized Under the Laws of:</b>  IDAHO W 1855		<b>6.</b> Signature  Date <b>10-16-06</b> Name <small>(Typed or Printed)</small> <b>Patrick W Flynn</b> Title <b>Manager</b>														

Issued 10/02/2006

**Do Not Tape or Staple**

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