No. W 11174	Due no later than February 28, 2006 Annual Report Form	2. Registered Agent and Office NO PO BOX KER! ERLAND
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address - Correct in this box, if applicable LAKE HARBOR INTERNAL MEDICINE ASSOC 3684 N HARBOR LANE BOISE, ID 83703	3684 N HARBOR LANE BOISE, ID 83703 3. New Registered Agent Signature
NO FILING FEE IF RECEIVED BY DUE DATE Limited Liability Compan Office held Name Name Keri Erla		Y <u>State</u> <u>Zip</u> STO 837-03
	6. Signature Kan hland Name (Typed or Printed) Keri Enland	Date 12/8105 Member and Title registered agent