

No. C 204409		Due no later than Dec 31, 2017 Annual Report Form		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		1. Mailing Address: Correct in this box if needed. GIBBAR ANESTHESIA, INC. ANGELA R GIBBAR 6944 N. CORNWALL STREET COEUR D ALENE ID 83815		SEAN P BOUTZ 1424 E SHERMAN AVE SUITE 300 COEUR D ALENE ID 83814			
						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	
PRESIDENT	ANGELA R GIBBAR	6944 N CORNWALL STREET	COEUR D ALENE	ID	USA	83815	
5. Organized Under the Laws of: ID C 204409		6. Annual Report must be signed.* Signature: Angela R Gibbar Name (type or print): Angela R Gibbar					
		Date: 11/16/2017 Title: President					
Processed 11/16/2017 * Electronically provided signatures are accepted as original signatures.							