

No. C 144729	Due no later than July 31, 2007 Annual Report Form		2. Registered Agent and Office NO PO BOX STEVEN J WRIGHT 477 SHOUP AVE STE 109 IDAHO FALLS, ID 83402	
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable MEDICAL PSYCHOTHERAPY, P.C. 3760 WASHINGTON PKWY IDAHO FALLS, ID 83404		3. New Registered Agent Signature 	
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.				
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>
President	Philip Gierling MD	3760 Washington PKWY	Idaho Falls	ID
5. Organized Under the Laws of: IDAHO C 144729		6. Signature <u></u> Date <u>5/14/07</u> Name (Typed or Printed) <u>Philip Gierling</u> Title <u>President</u>		