

No. W 44377	Due no later than Nov 30, 2012 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. IDAHO MEDICAL IMAGING, LLC GARY E TARTER 1151 HOSPITAL WAY BLDG 'B' 2ND FLOOR POCATELLO ID 83201 USA		GEORGE H STEPHENS MD 1151 HOSPITAL WY BLDG B 2ND FLOOR POCATELLO ID 83201				
			3. <u>New</u> Registered Agent Signature:*				
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	POCATELLO IMAGING ASSOCIATES	1151 HOSPITAL WAY BLDG B 2ND FLOOR	POCATELLO	ID	USA	83201	
MEMBER	GEORGE H STEPHENS	1151 HOSPITAL WAY BLDG B 2ND FLOOR	POCATELLO	ID	USA	83201	
MEMBER	CHRIS BACHMAN	1151 HOSPITAL WAY BLDG B 2ND FLOOR	POCATELLO	ID	USA	83201	
MEMBER	MATTHEW E. WILLIAMSON	1151 HOSPITAL WAY BLDG B 2ND FLOOR	POCATELLO	ID	USA	83201	
MEMBER	DAVID M. CAMERON	1151 HOSPITAL WAY BLDG B 2ND FLOOR	POCATELLO	ID	USA	83201	
5. Organized Under the Laws of: ID W 44377		6. Annual Report must be signed.* Signature: Gary E Tarter Name (type or print): Gary E Tarter Date: 10/31/2012 Title: Administrator					
Processed 10/31/2012		* Electronically provided signatures are accepted as original signatures.					