

No. <b>W 1855</b>		<b>Due no later than Dec 31, 2016</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  ANESTHESIA ASSOCIATES OF COEUR D'ALENE, P.L.L.C. ERIK J PAYNE 2204 N IRONWOOD PLACE STE B COEUR D'ALENE ID 83814		ERIK J PAYNE 2204 N IRONWOOD PLACE STE B COEUR D'ALENE ID 83814			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MEMBER	Name ERIK J PAYNE	Street or PO Address 2204 N IRONWOOD PLACE STE B		City COEUR D'ALENE	State ID	Country USA	Postal Code 83814-3444
5. Organized Under the Laws of:  <b>ID</b> <b>W 1855</b>		6. Annual Report must be signed.*  Signature: Erik J Payne Name (type or print): Erik J Payne  Date: 11/04/2016 Title: Managing Member					
Processed 11/04/2016 * Electronically provided signatures are accepted as original signatures.							