

No. C 58941	Due no later than July 31, 2006 Annual Report Form		2. Registered Agent and Office NO PO BOX LEO R. BROWN, M.D. 133 W 400 N RUPERT, ID 83350
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 applicable RUPERT MEDICAL - SURGICAL GROUP, P. LEO R. BROWN, M.D. 133 WEST 400 NORTH RUPERT, ID 83350		3. <u>New</u> 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> <u>Zip</u>
President	Leo R Brown	133W 400N	Rupert ID 83350
Vice-Pres.	Isabel Brown	133W 400N	Rupert ID 83350
5. Organized Under the Laws of: IDAHO C 58941		6. Signature <u>Isabel M. Brown</u> Date <u>05/09/2006</u> Name <small>(Typed or Printed)</small> <u>Isabel M. Brown</u> Title <u>Vice-Pres.</u>	

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Do Not Tape or Staple