

No. W 6222

Due no later than May 31, 2008

Annual Report Form

2. Registered Agent and Office NO PO BOX

LEENA HAUSER, M.D.
1321 OAKLEY NO 2
BURLEY, ID 83318

Return to:

SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address + Correct in this box, if applicable

SNAKE RIVER PATHOLOGY, PLLC
LEENA HAUSER, M.D.
1321 OAKLEY NO 2
BURLEY, ID 83318

3. New Registered Agent Signature

NO FILING FEE IF
RECEIVED BY DUE DATE

4. Limited Liability Companies: Enter Names and Addresses of Members.

Office held	Name	Street or P.O. Address	City	State	Zip
owner	Leena Hauser	1321 Oakley Ave #2	Burley	ID	83318

5. Organized Under the Laws of:
IDAHO
W 6222

6.

Signature

Leena Hauser

Date

3-25-08

Name (Typed or Printed)

Leena Hauser

Title

owner

200805005445

Issued 03/03/2008

Do Not Tape or Staple