No. <b>C 184284</b>		Due no later than Aug 31, 2010	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form	JEFFREY W MARTIN			
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.	700 S MAIN ST MOSCOW ID 83843			
		GRITMAN MEDICAL PARK CONDOMINIUM ASSOCIATION 2, INC. JEFFREY W. MARTIN				
		700 S MAIN ST	3. New Registered Agent Signature:*			
		MOSCOW ID 83843				
4. Corporations: Ent	ter Names and Busine	ess Addresses of President, Secretary, and Directors. Treasurer	(optional).			
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
DIRECTOR DIRECTOR	B J SWANS( KARA BESST		MOSCOW MOSCOW	ID ID	USA USA	83843 83843
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
ID		Signature: Becky Chavez	Date: 07/01/2010			
C 184284		Name (type or print): Becky Chavez	Title: Admin Assistant			
Processed 07/01/20	10	* Electronically provided signatures are accepted as original sign	natures.			