

No. W 7118		Due no later than October 31, 2008 Annual Report Form		2. Registered Agent and Office NO PO BOX	
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 IDAHO AMBULATORY SURGERY CENTER ASS 305 W JEFFERSON BOISE, ID 83702		SHERI SASS 305 W JEFFERSON BOISE, ID 83702	
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature	
4. Limited Liability Companies: Enter Names and Addresses of Managers.					
<u>Office held</u>		<u>Name</u>		<u>Street or P.O. Address</u>	<u>City</u> <u>State</u> <u>Zip</u>
<i>See attached</i>					
5. Organized Under the Laws of: IDAHO W 7118		6. Signature <i>[Signature]</i>		Date <i>10/27/08</i>	
		Name <small>(Typed or Printed)</small> <i>Shen Sass</i>		Title <i>Exec Dir</i>	

Issued 08/06/2008

Do Not Tape or Staple

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2008-2009 Board of Directors

Title	Center	FName	LName	Address	City	St	Zip
President	Lewis & Clark Surgery Center	Cindy	Keene	320 Warner Dr.	Lewiston	ID	83501
President Elect	Sawtooth Surgery Center	Debbie	Winsink	115 Falls Ave West	Twin Falls	ID	83301
Immed. Past President	Southern Idaho Pain Institute	Christy	Davies	236 Martin St	Twin Falls	ID	83301
Member At Large	Orthopaedic Surgery Center of Idaho	Ellen	Bencen	1425 W River St	Boise	ID	83702
Secretary/Treasurer	Ambulatory Surgery Center Burley	Shirley	Ramey	1344 Hiland Ave Suite E	Burley	ID	83318
Administrator	IASCA	Sheri	Sass	PO Box 2668	Boise	ID	83701