No. W 76721		Due no later than Aug 31, 2015		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form	KENT W ANDERSON				
SECRETARY OF STATE	1. Mailing Ad	1. Mailing Address: Correct in this box if needed. RADIATION ONCOLOGY ASSOCIATES PLLC KENT W ANDERSON PO BOX 203		504 6TH ST LEWISTON ID 83501			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	KENT W ANDE						
	LEWISTON ID	LEWISTON ID 83501		3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Ente	r Names and Addresses	of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER KENT W ANDERSON		504 6TH STREET DEPT RAD ONC	LEWISTON	ID	USA	83501	
5. Organized Under the Laws of: 6. Annual Report must be signed.*							
ID	Signature: Ken	Signature: Kent Anderson		Date: 07/21/2015			
W 76721	Name (type or	Name (type or print): Kent Anderson		Title: owner			
Processed 07/21/2015	* Electronically pro	* Electronically provided signatures are accepted as original signatures.					