No. C 130303	Due no later than Sep 30, 2012	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form	NANCY PARRY MD 431 WALNUT AVE N KETCHUM ID 83340 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. NANCY PARRY, M.D., P.C. NANCY PARRY PO BOX 2359 KETCHUM ID 83340-2359				
NO FILING FEE IF RECEIVED BY DUE DATE	USA				
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).					
Office Held Name	Street or PO Address	City	State	Country	Postal Code
PRESIDENT NANCY PA	RRY 431 WALNUT AVE	KETCHUM	ID	USA	83340-2359
5. Organized Under the Laws of:	6. Annual Report must be signed.*				
ID	Signature: Nancy Parry	Date: 09/26/2012			
C 130303	Name (type or print): Nancy Parry	Title: President			
Processed 09/26/2012	* Electronically provided signatures are accepted as original signatures.				