

No. C 146079

Due no later than November 30, 2006
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

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

DR. TIMOTHY E. SAWYER, M.D. CHTD.
3120 E RIVERNEST DR
BOISE, ID 83706DR TIMOTHY E SAWYER MD
3120 E RIVERNEST DR
BOISE, ID 83706NO FILING FEE IF
RECEIVED BY DUE DATE3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

Office heldNameStreet or P.O. AddressCityStateZipPresident Timothy E.
SAWYER3120 E. Rivercrest
Drive

Boise

ID

83706

5. Organized Under the Laws of:

IDAHO
C 146079

6.

Signature

Timothy E Sawyer MD

Date

10/29/06

Name (Typed or Printed)

Timothy Sawyer MD

Title

President

Issued 09/01/2006

Do Not Tape or Staple

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