

No. C 140650

Due no later than September 30, 2006
Annual Report Form

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

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

ORTHOPEDIC AMBULATORY ANESTHESIA, P
MARGARET KASPAR
605 E ROOSTER CT
EAGLE, ID 83616

2. Registered Agent and Office NO PO BOX

ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 7/18/06 BY 60322 UC/STP
2. Registered Agent at
ALLAN R BOSCH
225 N 9TH ST STE 2
BOISE, ID 83702

NO FILING FEE IF
RECEIVED BY DUE DATE

3. New Registered Agent Signature

OK

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

Office held	Name	Street or P.O. Address	City	State	Zip
Pres.	Margaret Kaspar	605 Rooster, Eagle	Eagle	ID	83616
Treas	Monly Marcher	" "	"	"	"

5. Organized Under the Laws of:

IDAHO
C 140650

6.

Signature

Margaret Kaspar

Date

7/18/06

Name (Typed or Printed)

Margaret Kaspar

Title

Pres

Issued 07/03/2006

Do Not Tape or Staple

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