

No. W 23684

Due no later than April 30, 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 SURGICENTER NORTH, LLC
3369 MERLIN DR
IDAHO FALLS, ID 83404
physical ↑
PO Box 1386 IF, ID 83403 mailing ↑

TONY D QUINTON
3369 MERLIN DR
IDAHO FALLS, ID 83404

NO FILING FEE IF
RECEIVED BY DUE DATE

3. New 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>
owner	Tony D. Quinton	3369 Merlin Dr.	Idaho Falls	ID	83404

5. Organized Under the Laws of:

IDAHO
W 23684

6.

Signature

Date 2-14-08

Name (Typed or Printed)

Tony D. Quinton

Title owner

Issued 02/01/2008

Do Not Tape or Staple

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