

No. W 31874		Due no later than Jul 31, 2010		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form		MARK W PETERSON 531 4TH AVE LEWISTON ID 83501			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		PHOENIX RADIOLOGY PLLC MARK W PETERSON 531 4TH AVE LEWISTON ID 83501					
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER	MARK W PETERSON MD	PO BOX 1443	LEWISTON	ID	USA	83501	
MEMBER	PAUL J SANCHIRICO	531 4TH AVE	LEWISTON	ID	USA	83501	
MEMBER	MARK TERRY MD	531 FOURTH AVE	LEWISTON	ID	USA	83501	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 31874		Signature: Mark W Peterson				Date: 05/21/2010	
		Name (type or print): Mark W Peterson				Title: Member	
Processed 05/21/2010		* Electronically provided signatures are accepted as original signatures.					