

No. **W 29337**

**Due no later than March 31, 2005
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

MEDCO BILLING SERVICE LLC
ROHN HOLMAN
PO BOX 544
REXBURG, ID 83440

ROHN HOLMAN
393 E 2ND N
REXBURG, ID 83440

**NO FILING FEE IF
RECEIVED BY DUE DATE**

3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Members.

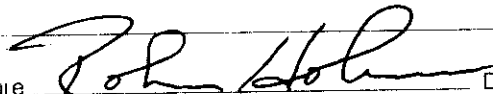
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Pres.	Rohn Holman	915 Greenhaven Cir.	Rexburg	ID	83440
Sec.	Valerie Holman				

5. Organized Under the Laws of:

IDAHO
W 29337

6.

Signature



Date

1-10-05

Name (Typed or Printed)

Rohn Holman

Title

pres.