

No. C 155090

Due no later than June 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

SNAKE RIVER MEDICAL SERVICES, INC.
526-C SHOUP AVE W
TWIN FALLS, ID 83301CARLA MILLER
124 E 300 N
JEROME, ID 83338NO FILING FEE IF
RECEIVED BY DUE DATE3. New Registered Agent Signature

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

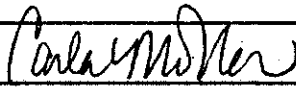
Office held	Name	Street or P.O. Address	City	State	Zip
President	Carla Miller	526-C Shoup Ave W	Twin Falls	Id.	83301
Secretary	Carla Miller	526-C Shoup Ave W	Twin Falls	Id.	83301
Director	Carla Miller	526-C Shoup Ave W	Twin Falls	Id.	83301

5. Organized Under the Laws of:

IDAHO
C 155090

6.

Signature



Date

4-9-08

Name (Typed or Printed)

Carla Miller

Title

President