

No. C 163826	Due no later than Dec 31, 2010 Annual Report Form		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	1. Mailing Address: Correct in this box if needed. INPATIENT SERVICES OF IDAHO, P.C. 6200 S SYRACUSE WAY, SUITE 200 MS110 GREENWOOD VILLAGE CO 80111		CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713 USA			
			3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
PRESIDENT	M. JEFFREY SLEPIN, M.D.	6200 S. SYRACUSE WAY STE 200 MS110	GREENWOOD VILLAGE	CO	USA	80111
SECRETARY	M. JEFFREY SLEPIN, M.D.	6200 S. SYRACUSE WAY STE 200 MS110	GREENWOOD VILLAGE	CO	USA	80111
DIRECTOR	M. JEFFREY SLEPIN, M.D.	6200 S. SYRACUSE WAY STE 200 MS110	GREENWOOD VILLAGE	CO	USA	80111
5. Organized Under the Laws of: ID C 163826		6. Annual Report must be signed.* Signature: M. Jeffrey Slepín Name (type or print): M. Jeffrey Slepín Date: 11/22/2010 Title: Authorized Person				
Processed 11/22/2010		* Electronically provided signatures are accepted as original signatures.				