

No. <b>W 5664</b>		Due no later than Mar 31, 2012		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  TREASURE VALLEY ANESTHESIA, PLLC CARLENE M CANFIELD PO BOX 95 MERIDIAN ID 83680 USA		CARLENE M CANFIELD 2100 CLEARVUE CT WEST EAGLE ID 83616			
				3. <u>New</u> Registered Agent Signature:*			
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	CARLENE M CANFIELD	PO BOX 95	MERIDIAN	ID	USA	83680	
5. Organized Under the Laws of:  <b>ID W 5664</b>		6. Annual Report must be signed.* Signature: Carlene M Canfield Name (type or print): Carlene M Canfield Date: 02/06/2012 Title: Member-Mgr					
Processed 02/06/2012		* Electronically provided signatures are accepted as original signatures.					