

No. C 119366		Due no later than May 31, 2012		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 1. Mailing Address: Correct in this box if needed. STEVEN E. OZERAN, M.D., P.A. STEVEN E OZERAN 1630 23RD AVE #901 A LEWISTON ID 83501		STEVEN E OZERAN 1630 23RD AVENUE, SUITE 901A LEWISTON ID 83501		
				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
TREASURER	STEVEN E OZERAN	1630 23RD AVENUE, SUITE 901A	LEWISTON	ID	USA	83501
SECRETARY	STEPHANIE N OZERAN	1630 23RD AVENUE, SUITE 901A	LEWISTON	ID	USA	83501
PRESIDENT	STEVEN E OZERAN	1630 23RD AVENUE, SUITE 901A	LEWISTON	ID	USA	83501
5. Organized Under the Laws of: ID C 119366		6. Annual Report must be signed.* Signature: Steven E Ozeran MD PA Name (type or print): Steven E Ozeran MD PA Date: 05/03/2012 Title: President				
Processed 05/03/2012		* Electronically provided signatures are accepted as original signatures.				