No. W 98103		Due no later than Nov 30, 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. PATRICK J. MULLEN, M.D., PLLC SCOTT L POORMAN PO BOX 2871 HAYDEN ID 83835		SCOTT L POORMAN 8884 N GOVERNMENT WAY STE E HAYDEN ID 83835			
				3. New Registered Agent Signature:*			
200	ies: Enter Nai	mes and Addresses of a	t least one Member or Manager.				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
MEMBER MEMBER	PATRICK J MULLEN TERESA MULLEN		750 N SYRINGA STREET SUITE 204 750 N SYRINGA STREET SUITE 204	POST FALLS POST FALLS	ID ID	USA USA	83854 83854
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: Scott L. Poorman Date: 11/06/2012					
W 98103		Name (type or print): Scott L. Poorman		Title: Registered Agent			
Processed 11/06/2012 * Electronically provided signatures are accepted as original signatures.							