

No. <b>C 109270</b>		<b>Due no later than Feb 29, 2012</b>		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>1. Mailing Address: Correct in this box if needed.</b>  TWO RIVERS MEDICAL CLINIC, P.A. DELAND R BARR 683 EAST THIRD WEISER ID 83672		DELAND R BARR 683 EAST THIRD WEISER ID 83672		
				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	DELAND R BARR	683 EAST THIRD	WEISER	ID	USA	83672
SECRETARY	ANTHONY L EDMONDSON	683 EAST THIRD	WEISER	ID	USA	83672
TREASURER	LORE B WOOTTON	683 EAST THIRD	WEISER	ID	USA	83672
5. Organized Under the Laws of:  <b>ID C 109270</b>		6. Annual Report must be signed.* Signature: Anthony L. Edmondson Name (type or print): Anthony L. Edmondson Date: 12/12/2011 Title: Corp. Sec.				
Processed 12/12/2011		* Electronically provided signatures are accepted as original signatures.				