

No. W 69094

**Due no later than December 31, 2008
Annual Report Form**

2. Registered Agent and Office **NO PO BOX**

Return to:

SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

SAGE PSYCHIATRIC MANAGEMENT, PLLC
413 N ALLUMBAUGH ST #101
BOISE, ID 83704-9208

CHARLES C NOVAK MD
413 N ALLUMBAUGH ST #101
BOISE, ID 83704-9208

**NO FILING FEE IF
RECEIVED BY DUE DATE**

3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Members.

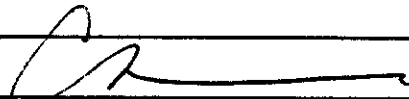
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
member-owner	Charles C Novak MD		413 N. ALLUMBAUGH, STE. 101		
member-owner	Roberto Negrón MD		BOISE, IDAHO		83704

5. Organized Under the Laws of:

IDAHO
W 69094

6.

Signature



Date

10/10/08

Name

(Typed or
Printed)

Charles Novak MD

Title

Owner