

No. C 209687		Due no later than May 31, 2018 Annual Report Form		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		1. Mailing Address: Correct in this box if needed. HOSPITAL MEDICINE ASSOCIATES OF IDAHO, P.C. LEGAL DEPT 256 BROOKVIEW CENTRE WAY STE 400 KNOXVILLE TN 37919		CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713			
				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	
SECRETARY	JOHN R STAIR	265 BROOKVIEW CENTRE WAY SUITE 400	KNOXVILLE	TN	USA	37919	
DIRECTOR	SUJAL MANDAVIA, MD	4605 LANKERSHIM BLVD. SUITE 617	NORTH HOLLYWOOD	CA	USA	91602	
PRESIDENT	SUJAL MANDAVIA, MD	4605 LANKERSHIM BLVD. SUITE 617	NORTH HOLLYWOOD	CA	USA	91602	
5. Organized Under the Laws of: ID C 209687		6. Annual Report must be signed.* Signature: John R Stair Name (type or print): John R Stair					
Date: 05/08/2018		Title: Secretary					
Processed 05/08/2018		* Electronically provided signatures are accepted as original signatures.					