

No. W 836		Due no later than Jan 31, 2006		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. BENGAL EQUIPMENT LEASING, L.L.C. M R MICKELSON, M.D. 560 MEMORIAL DR POCATELLO ID 83201 0000		M R MICKELSON, M.D. 560 MEMORIAL DR POCATELLO ID 83201 0000	
				3. <u>New</u> Registered Agent Signature:*	
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country Postal Code
MEMBER	M R MICKELSON, M.D.	560 MEMORIAL DR	POCATELLO	ID	83201
MEMBER	KENNETH E NEWHOUSE, M.D.	560 MEMORIAL DR	POCATELLO	ID	83201
5. Organized Under the Laws of: IDAHO W 836		6. Annual Report must be signed.* Signature: Katherine Taylor Name (type or print): Katherine Taylor Date: 02/15/2006 Title: Bookkeeper			
Processed 02/15/2006		* Electronically provided signatures are accepted as original signatures.			