

No. W 23303		Due no later than Mar 31, 2015		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. IPC SURGICAL CENTER, LLC TERI PALUSO 2841 JUNIPER DR LEWISTON ID 83501		CRAIG G FLINDERS MD 2841 JUNIPER DR LEWISTON 83501	
				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	LYNDAL E STOUTIN	237 PRESTON	LEWISTON	ID	83501
MEMBER	CRAIG G FLINDERS	890 PAULINE DR	CLARKSTON	WA	99403
MEMBER	GARY G HAAS	6604 COUGAR RIDGE	LEWISTON	ID	83501
5. Organized Under the Laws of: ID W 23303		6. Annual Report must be signed.* Signature: Teresa Paluso Name (type or print): Teresa Paluso Date: 01/20/2015 Title: Administrator			
Processed 01/20/2015		* Electronically provided signatures are accepted as original signatures.			