No. <b>W 7745</b>		Due no later than Jan 31, 2010		2.	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  HIGHLAND MEDICAL PARK, LLC DAVID L HUNTER PO BOX 1243 POCATELLO ID 83204			DAVID L HUNTER 216 N 8TH AVE POCATELLO ID 83204  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Enter Nar		ames and Addresses of	at lasst one Member or Manager					
Office Held	Name	arries and Addresses of	Street or PO Address	(	City	State	Country	Postal Code
MANAGER	ROBERT JO	DNES	1951 BENCH ROAD SUITE C	F	POCATELLO	ID	USA	83201
5. Organized Under the Laws of:  ID  W 7745		6. Annual Report must be signed.*  Signature: David L Hunter  Name (type or print): David L Hunter			Date: 01/09/2010 Title: Accountant			
Processed 01/09/2010 * Electronically provided signatures are accepted as original signatures.								