

No. W 17473		Due no later than Dec 31, 2007		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. MEDICAL RECOVERY SERVICES, LLC. NED A ZOLLINGER PO BOX 51178 IDAHO FALLS ID 83405		NED A ZOLLINGER 115 E MAIN ST REXBURG ID 83440			
				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	
MANAGER	BRYAN D SMITH	PO BOX 50731	IDAHO FALLS	ID	USA	83405	
MANAGER	GULLBORN INVESTMENT FAMILY LIMITED PARTNERSHIP	3373 CHARLESTON LN	IDAHO FALLS	ID	USA	83404	
MANAGER	NED ZOLLINGER	PO BOX 276	REXBURG	ID	USA	83440	
5. Organized Under the Laws of: ID W 17473		6. Annual Report must be signed.* Signature: Ned A Zollinger Name (type or print): Ned A Zollinger Date: 12/07/2007 Title: Manager					
Processed 12/07/2007		* Electronically provided signatures are accepted as original signatures.					