REINSTATEMENT

FILED EFFECTIVE

No. L 102	**Annual Report Form** ADMIN TERMINATED 09/05/2007	2. Registered Agent and Office **NOT A P.O. BOX**
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 ~~FEE DUE: $0.00~~	1. Mailing Address - Correct in this box, if applicable FAMILY MEDICAL ASSOCIATES LIMITED P ~~HOLDEN, KIDWELL ET AL~~ c/o NELSON + TOLMAKEND ~~BOX 129~~ 485 E STREET IDAHO FALLS, ID 83402	ROGERS S. BRUNT 2340 VIRLOW DR IDAHO FALLS, ID 83401 3. New registered agent signature

4. Corporations: Enter Names and Business Addresses of **President, Secretary and Directors**
Limited Liability Companies: Enter Names and Addresses of management
Limited Partnerships and LLLPs: Enter Names and Addresses of **General Partners**
Limited and Limited Liability Partnerships: Enter names and addresses of at least two (2) partners.

Office held	Name	Street or P.O. Address	City	State	Zip
General Partner	Family Emergency Center Ptr	485 E STREET	IDAHO FALLS	ID	83402

5. Organized under the laws of:
IDAHO
L 102

6. Signature Burton E Brown for Fec, ptr Date 11-27-07
Name (Typed or Printed) Burton E Brown Title Gen Ptr

Issued 11/20/2007 by LG