No. W 23549	Due no later than Apr 30, 2009		2. Registered Agent and Address (NO PO BOX)				
Return to:	Anı	Annual Report Form		STEVEN J WRIGHT			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed. SUMMIT HEALTH PROFESSIONALS, PLLC PHILIP WILLIAM GIRLING MD 3760 WASHINGTON PARKWAY			477 SHOUP AVE STE 109 IDAHO FALLS ID 83402			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080			IDANO FALLS ID 65402				
	IDAHO FALLS ID 83404		3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Enter Na	mes and Addresses of	at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER PHILIP WILL	IAM GIRLING MD	1970 E 17TH ST STE 104	IDAHO FALLS	ID	USA	83404	
5. Organized Under the Laws of:	6. Annual Report must be signed.*						
ID	Signature: Steven J. Wright		Date: 03/02/2009				
W 23549	Name (type or print): Steven J. Wright		Title: Registered Agent				
Processed 03/02/2009	* Electronically provided signatures are accepted as original signatures.						