

No. <b>W 12305</b>	<b>Due no later than Jun 30, 2003 Annual Report Form</b>		2. Registered Agent and Office <b>NO PO BOX</b>																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	1. Mailing Address (Correct in this box, if applicable)		MICHAEL BLEFFERT																		
	EAGLE ORTHOPEDIC & SPORTS PHYSICAL therapy, PLLC 57 SOUTH MAIN ST  DRIGGS, ID 83422		9 W RENDEZVOUS  DRIGGS, ID 83422  3. <u>New</u> Registered Agent Signature																		
4. Limited Liability Companies: Enter Names and Addresses of Members. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>Managing Member</td> <td>Michael Bleffert</td> <td>9W. East Rendezvous</td> <td>Driggs</td> <td>ID</td> <td>83422</td> </tr> <tr> <td>Managing Member</td> <td>Christi Lundberg-Bleffert</td> <td>9W. East Rendezvous</td> <td>Driggs</td> <td>ID</td> <td>83422</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	Managing Member	Michael Bleffert	9W. East Rendezvous	Driggs	ID	83422	Managing Member	Christi Lundberg-Bleffert	9W. East Rendezvous	Driggs	ID	83422
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5. Organized Under the Laws of:  IDAHO W 12305		6. Signature <u>Christi Lundberg-Bleffert</u> Date <u>6/26/03</u> Name (Typed or Printed) <u>Christi Lundberg-Bleffert</u> Title <u>Managing Member</u>																			