No. <b>W 4419</b>		Due no later than Jul 31, 2014		2. Registered A	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 SERVICE ASSOCIATES, L.L.C.  MARY E ZOLLINGER  393 E 2ND N  REXBURG ID 83440  USA  mes and Addresses of at least one Member or Manager.		393 E 2ND N	C JEFFREY ZOLLINGER 393 E 2ND N REXBURG ID 83440  3. New Registered Agent Signature:*			
				3. <u>New</u> Registe				
Office Held	Name	illes alla Adalesses	Street or PO Address	City	State	Country	Postal Code	
MANAGER C JEFFREY ZOLLINGER MANAGER MARY ZOLLINGER		393 E 2ND N 950 GREENHAVEN	REXBURG REXBURG	ID ID	USA USA	83440 83440		
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 4419		Signature: Mary Zollinger			Date: 08/18/2014			
		Name (type or print): Mary Zollinger			Title: Manager			
Processed 08/18/20	14	* Electronically pro	ovided signatures are accepted as origin	nal signatures.				