

No. **W 41068**

**Due no later than July 31, 2006**

**Annual Report Form**

Return to:  
SECRETARY OF STATE  
700 WEST JEFFERSON  
PO BOX 83720  
BOISE, ID 83720-0080

**1. Mailing Address - Correct in this box, if applicable**

INTERMOUNTAIN ORTHOPAEDICS REAL EST  
600 ROBBINS RD STE 100  
BOISE, ID 83701

**2. Registered Agent and Office NO PO BOX**

PATRICK J MILLER  
601 W BANNOCK  
BOISE, ID 83702

**NO FILING FEE IF  
RECEIVED BY DUE DATE**

**3. New Registered Agent Signature**

**4. Limited Liability Companies: Enter Names and Addresses of Managers.**

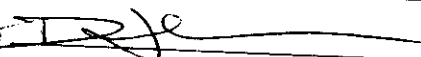
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
	Steven Roser, M.D.	600 Robbins Rd Ste 401	Boise	ID	83702
	Larry Showalter, M.D.	600 Robbins Rd Ste 401	Boise	ID	83702

**5. Organized Under the Laws of:**

IDAHO  
W 41068

**6.**

Signature



Date 5/17/06

Name (Typed or Printed)

David Kirk

Title Administrator

Issued 05/01/2006

**Do Not Tape or Staple**

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