




No. W 10332	Due no later than December 31, 2003 Annual Report Form		2. Registered Agent and Office NO PO BOX DAVID E MORLEDGE PHD 4974 S WALCOTT AVE BOISE, ID 83709
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box if applicable NEUROSTATUS, LLC. 4974 S WALCOTT AVE BOISE, ID 83709		3. <u>New</u> 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>
Manager	David E. Morledge	4974 S. Walcott Ave	Boise	ID	83709
Member	Barbara S. Morledge	4974 S. Walcott Ave	Boise	ID	83709

5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO W 10332 </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">Signature </td> <td style="width: 20%;">Date</td> <td style="width: 40%;">10/16/2003</td> </tr> <tr> <td>Name (Typed or Printed) David E. Morledge</td> <td>Title</td> <td>Manager</td> </tr> </table>	Signature 	Date	10/16/2003	Name (Typed or Printed) David E. Morledge	Title	Manager
Signature 	Date	10/16/2003					
Name (Typed or Printed) David E. Morledge	Title	Manager					