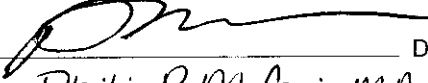


No. W 16838	Due no later than October 31, 2004 Annual Report Form		2. Registered Agent and Office NO PO BOX												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable		PHILIP R MCCOWIN 2730 CHANNING WAY IDAHO FALLS, ID 83404 3. <u>New</u> Registered Agent Signature												
	SUMMIT ORTHOPAEDICS EQUITY, PLLC 2730 CHANNING WAY IDAHO FALLS ID 83404														
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="0" style="width:100%"> <tr> <td style="text-align:center"><u>Office held</u></td> <td style="text-align:center"><u>Name</u></td> <td style="text-align:center"><u>Street or P.O. Address</u></td> <td style="text-align:center"><u>City</u></td> <td style="text-align:center"><u>State</u></td> <td style="text-align:center"><u>Zip</u></td> </tr> <tr> <td></td> <td>President Phil McCowin</td> <td>2321 Cononado St.</td> <td>Idaho Falls,</td> <td>ID</td> <td>83404</td> </tr> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>		President Phil McCowin	2321 Cononado St.	Idaho Falls,	ID	83404
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
	President Phil McCowin	2321 Cononado St.	Idaho Falls,	ID	83404										
5. Organized Under the Laws of: IDAHO W 16838		6. Signature  Date <u>9/2/2004</u> Name <small>(Typed or Printed)</small> <u>Philip R. McCowin, M.D.</u> Title <u>President</u>													