

No. C 156843

Due no later than October 31, 2008

Annual Report Form

Return to:

SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

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

DONALD A. BAKER, M.D., P.A.
PO BOX 766
SPIRIT LAKE, ID 83869

2. Registered Agent and Office NO PO BOX

DONALD A BAKER
32168 N 5TH AVE
SPIRIT LAKE, ID 83869

NO FILING FEE IF
RECEIVED BY DUE DATE

3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

Office held

Name

Street or P.O. Address

City

State

Zip

OWNER DON BAKER, M.D.
32168 No. 5th Ave Spirit Lake
Idaho 83869

5. Organized Under the Laws of:

IDAHO
C 156843

6.

Signature

Date

Name

(Typed or
Printed)

Donald A. Baker, MD

Title

owner

Issued 08/06/2008

Do Not Tape or Staple

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