No. W 8847

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

NO FILING FEE IF RECEIVED BY DUE DATE

Due no later than May 31, 2008
Annual Report Form

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

TRINITY MOUNTAIN FAMILY PRACTICE PH
TIMOTHY L BRININGER MD
562 E DANSKIN
BOISE, ID 83716

2. Registered Agent and Office NO PO BOX

TIMOTHY L BRININGER, M.D.
562 E DANSKIN
BOISE, ID 83716

3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Members.

Office held	Name	Street or P.O. Address	City	State	Zip
MEMBER	~~[illegible]~~ Timothy Brininger	562 E Danskin	Boise	ID	83716
MEMBER	Kara Olson	12285 Highway 20	MTN Home	ID	83647
MEMBER	D. Dan Crossley	2170 County Blue Court	MTN Home	ID	83647
MEMBER	Wahlee Bledsoe	243 S. Bledsoe Rd	Hammett	ID	83624

5. Organized Under the Laws of:
IDAHO
W 8847

6.
Signature _____ Date 19 MARCH 08
Name (Typed or Printed) Timothy Brininger MD Title MEMBER

Issued 03/03/2008

Do Not Tape or Staple

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