No. <b>C 164207</b>	Due no later than Dec 31, 2006			2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form			LORINDA L SANDERS			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720	1. Mailing Address: Correct in this box if needed.  INTEGRITY THERAPEUTIC SERVICES, P.C.  LORINDA L SANDERS  PO BOX 783  WEISER ID 83672		34 E IDAHO STE 1 WEISER ID 83672  3. New Registered Agent Signature:*				
BOISE, ID 83720-0080							
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held Name		Street or PO Address		City	State	Country	Postal Code
PRESIDENT MATTHEW V	W SANDERS	P.O. BOX 783		WEISER	ID	USA	83672
5. Organized Under the Laws of:	6. Annual Report must be signed.*						
IDA HO	IDAHO Signature: Lorinda L Sanders			Date: 10/12/2006			
C 164207	Name (type or print): Lorinda L Sanders			Title: Owner			
Processed 10/12/2006	* Electronically provided signatures are accepted as original signatures.						