

No. <b>W 54229</b>		<b>Due no later than Sep 30, 2009</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  ORTHOPEDIC ASSOCIATES REAL ESTATE, LLC ANN POOLE 1107 W IRONWOOD DR COEUR D'ALENE ID 83814		JONATHAN S KING M.D. 1107 W IRONWOOD DR COEUR D'ALENE ID 83814			
				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER	LLOYD E WITHAM M.D.	1107 W IRONWOOD DR	COEUR D'ALENE	ID	USA	83814	
MEMBER	JONATHAN S KING M.D.	1107 W IRONWOOD DR	COEUR D'ALENE	ID	USA	83814	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 54229</b>		Signature: Ann Poole				Date: 09/15/2009	
		Name (type or print): Ann Poole				Title: Business Manager	
Processed 09/15/2009		* Electronically provided signatures are accepted as original signatures.					