

No. <b>C 108735</b>		<b>Due no later than December 31, 2005</b>		2. Registered Agent and Office <b>NO PO BOX</b> <b>DOUGLAS E SMITH</b> STE 307 222 N 2ND ST BOISE, ID 83702	
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>Annual Report Form</b>		3. <u>New</u> Registered Agent Signature	
		<b>1. Mailing Address - Correct in this box, if applicable</b>			
		IDAHO NEUROLOGICAL SURGERY, P.A. 222 N 2ND ST SUITE 307 BOISE, ID 83702			
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.					
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
PRESIDENT & OWNER	DOUGLAS E. SMITH	222 N. 2ND STREET, SUITE 307	BOISE	ID	83702
5. Organized Under the Laws of: IDAHO C 108735		6. Signature <u><i>Douglas E. Smith</i></u> Date <u>10/21/05</u> Name <small>(Typed or Printed)</small> <u>DOUGLAS E. SMITH</u> Title <u>PRESIDENT</u>			

Issued 10/03/2005

Do Not Tape or Staple

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