

No. J 261		Due no later than Oct 31, 2014		2. Registered Agent and Address (NO PO BOX)		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. WOMAN'S CLINIC, LLP ATTN MATTHEW CHASAN 100 E IDAHO ST STE 400 BOISE ID 83712		ANTHONY SCHIRER 100 E IDAHO ST STE 400 BOISE ID 83712		
				3. <u>New</u> Registered Agent Signature:*		
4. Limited Liability Partnerships: Enter Names and Business Addresses of two (2) or more partners.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
PARTNER	JENNI BRADLEY MD PA	100 E IDAHO ST STE 400	BOISE	ID	USA	83712
PARTNER	KATHLEEN KEATING DO PA	100 E IDAHO ST STE 400	BOISE	ID	USA	83712
PARTNER	HEIDI BENDORF CHASAN MD PA	100 E IDAHO ST STE 400	BOISE	ID	USA	83712
PARTNER	NECOLE JAVERNICK-HODGES MD PA	100 E IDAHO ST STE 400	BOISE	ID	USA	83712
PARTNER	BRYAN F HODGES MD PA	100 E IDAHO ST STE 400	BOISE	ID	USA	83712
PARTNER	B KERRY LOWDER MD PA	100 E IDAHO ST STE 400	BOISE	ID	USA	83712
PARTNER	ROBERT W DAVIS, M.D., P.A.	100 E IDAHO ST STE 400	BOISE	ID	USA	83712
PARTNER	TIMOTHY A WEST MD PA	100 E IDAHO ST STE 400	BOISE	ID	USA	83712
5. Organized Under the Laws of: ID J 261		6. Annual Report must be signed.* Signature: Matthew Chasan Name (type or print): Matthew Chasan Date: 08/20/2014 Title: Bookkeeper				
Processed 08/20/2014		* Electronically provided signatures are accepted as original signatures.				