No. C 157518		Due no later than Nov 30, 2013		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. ORTHOPAEDIC ASSOCIATES, P.A. MARK C CLAWSON, MD 8854 W EMERALD ST #140 BOISE ID 83704		8854 W EM BOISE ID	MARK C CLAWSON MD 8854 W EMERALD ST #140 BOISE ID 83704 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA						
4. Corporations: Enter Nar	mes and Busin	ess Addresses of P	resident, Secretary, and Directors. Treaso	ırer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY	MARK C CL	AWSON	8854 W EMERALD ST #140	BOISE	ID	USA	83704	
DIRECTOR	ECTOR JARED P TA		8854 W EMERALD ST #140	BOISE	ID	USA	83704	
DIRECTOR			8854 W EMERALD ST #140	BOISE	ID	USA	83704	
PRESIDENT	RESIDENT JEFFREY G HESSIN		8854 W EMERALD ST #140	BOISE	ID	USA	83704	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Mark C Clawson Md			Date: 09/23/2013			
C 157518		Name (type or print): Mark C Clawson Md			Title: Secretary			
Processed 09/23/2013		* Electronically pro	ovided signatures are accepted as original	signatures.				