

No. <b>C 157518</b>		Due no later than Nov 30, 2012		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> ORTHOPAEDIC ASSOCIATES, P.A. MARK C CLAWSON, MD 901 N CURTIS RD BOISE ID 83706 USA		MARK C CLAWSON MD 901 N CURTIS RD BOISE ID 83706		
				3. <u>New</u> Registered Agent Signature:*		
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
SECRETARY	MARK C CLAWSON	901 N CURTIS RD #501	BOISE	ID	USA	83706
DIRECTOR	JARED P TADJE	901 N CURTIS RD #501	BOISE	ID	USA	83706
DIRECTOR	GREGORY P SCHWEIGER	901 N CURTIS RD #501	BOISE	ID	USA	83706
DIRECTOR	TIMOTHY E DOERR	901 N CURTIS RD #501	BOISE	ID	USA	83706
DIRECTOR	MARK C MEIER	901 N CURTIS RD #501	BOISE	ID	USA	83706
PRESIDENT	JEFFREY G HESSING	901 CURTIS RD #501	BOISE	ID	USA	83706
5. Organized Under the Laws of:  <b>ID C 157518</b>		6. Annual Report must be signed.* Signature: Mark Clawson Name (type or print): Mark Clawson Date: 09/12/2012 Title: Secretary				
Processed 09/12/2012		* Electronically provided signatures are accepted as original signatures.				