

No. W 25280

Due no later than July 31, 2008
Annual Report Form

2. Registered Agent and Office NO PO BOX

CINDY L KEENE
320 WARNER DR
LEWISTON, ID 835013. New Registered Agent Signature

Return to:

SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

LEWIS & CLARK ORTHOPAEDIC INSTITUTE
318 WARNER DR
LEWISTON, ID 83501NO FILING FEE IF
RECEIVED BY DUE DATE

4. Limited Liability Companies: Enter Names and Addresses of Members.

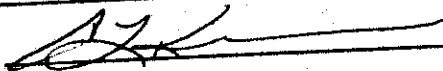
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
MEMBER	STEVEN R. BOYEA	320 WARNER DRIVE	LEWISTON	ID	83501
MEMBER	GREGORY D. DIETRICH	320 WARNER DRIVE	LEWISTON	ID	83501
MEMBER	TIMOTHY J. FLOCK	320 WARNER DRIVE	LEWISTON	ID	83501
MEMBER	REGAN B. HANSEN	320 WARNER DRIVE	LEWISTON	ID	83501
MEMBER	MARVIN R. KYM	320 WARNER DRIVE	LEWISTON	ID	83501

5. Organized Under the Laws of:

IDAHO
W 25280

6.

Signature



Date 5/23/2008

Name

(Typed or
Printed)

Cindy L. Keene

Title

CEO

200807005750