

No. W 55046

Due no later than October 31, 2007

Annual Report Form

2. Registered Agent and Office NO PO BOX

LOUIS KRAML
98 POPLAR ST
BLACKFOOT, ID 83221

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.

DOCTORS AND HOSPITAL HEALTH SYSTEM
LOUIS KRAML
98 POPLAR ST
BLACKFOOT, ID 83221

NO FILING FEE IF
RECEIVED BY DUE DATE

3. New Registered Agent Signature

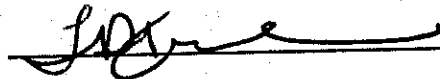
4. Limited Liability Companies: Enter Names and Addresses of Managers.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	Louis Kraml	98 Poplar Street	Blackfoot	ID	83221
Vice President	Jake Erickson	98 Poplar Street	Blackfoot	ID	83221
Sec/Treasurer	Jeff Daniels	98 Poplar Street	Blackfoot	ID	83221

5. Organized Under the Laws of:
IDAHO
W 55046

6.

Signature



Date

Name (Typed or Printed)

Title

Issued 08/02/2007

Do Not Tape or Staple

200710006975