

No. C 160572		Due no later than May 31, 2011 Annual Report Form		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		1. Mailing Address: Correct in this box if needed. MARK A. SPELICH, MD, PC JAMEE SHANAFELT ALLIED ORTHOPAEDICS 7979 W RIFLEMAN BOISE ID 83704 USA		INCORP SERVICES, INC. 921 S ORCHARD ST STE G BOISE ID 83705 USA			
						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	
PRESIDENT	MARK A SPELICH	PO BOX 8285	BOISE	ID	USA	83707	
5. Organized Under the Laws of: ID C 160572		6. Annual Report must be signed.* Signature: Mark A Spelich Name (type or print): Mark A Spelich					
		Date: 03/17/2011 Title: President					
Processed 03/17/2011 * Electronically provided signatures are accepted as original signatures.							