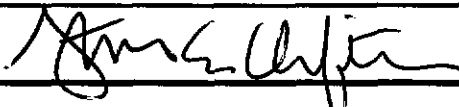


No. <b>W 93641</b>	<b>Due no later than May 31, 2012</b> <b>Annual Report Form</b>	2. Registered Agent and Office ( <b>NOT A P.O. BOX</b> ) CT CORPORATION SYSTEM 1111 W JEFFERSON STE 530 BOISE ID 83702				
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b> EAST FALLS CARDIOVASCULAR AND THORACIC SURGERY, LLC LEGAL DEPARTMENT ONE PARK PLAZA NASHVILLE TN 37203	3. <u>New</u> Registered Agent Signature.				
<b>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</b>						
<b>Manager or Member</b>	<b>Name</b>	<b>Street or PO Address</b>	<b>City</b>	<b>State</b>	<b>Country</b>	<b>Postal Code</b>
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	William B. Rutherford	One Park Plaza	Nashville	TN	US	37203
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Steven E. Clifton	One Park Plaza	Nashville	TN	US	37023
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Donald W. Stinnett	One Park Plaza	Nashville	TN	US	37203
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
5. Organized Under the Laws of:  <div style="text-align: center;"> <b>IDAHO</b>  <b>W 93641</b> </div>		6. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>           Signature:             Name (type or print): <b>Steven E. Clifton</b> </div> <div>           Date: <b>4/19/2012</b>            Title: <b>Manager</b> </div> </div>				
Issued 04/17/2012 by PEH						130253