No. W 8836		Due no later than May 31, 2017		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. TETON VALLEY MEDICAL PROPERTIES, LLC LARRY T CURTIS PO BOX 800 DRIGGS ID 83422		480 S 4TH REXBURG 1	LARRY T CURTIS 480 S 4TH EAST REXBURG ID 83440 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Regist	ereu Agene 3	ignature.		
700 97 7	es: Enter Nai Name	mes and Addresses	of at least one Member or Manager. Street or PO Address	City	State	Country	Postal Code	
MEMBER I	LARRY T CI DEBORAH T		PO BOX 29 283 N 1ST E PO BOX 29 283 N 1ST E	DRIGGS DRIGGS	ID ID	Country	83422 83422	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Larry Curtis			Date: 03/20/2017			
W 8836		Name (type or print): Larry Curtis			Title: Member			
Processed 03/20/2017	rocessed 03/20/2017 * Electronically provided signatures are accepted as original signatures.							