

No. W 59077

Due no later than February 29, 2008

Annual Report Form

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

NORTH IDAHO WORKER CARE, PLLC
JACK T RIGGS MD
927 E POLSTON AVE #303
POST FALLS, ID 83854

2. Registered Agent and Office NO PO BOX

JACK T RIGGS MD
927 E POLSTON AVE #303
POST FALLS, ID 83854

NO FILING FEE IF
RECEIVED BY DUE DATE

3. New Registered Agent Signature

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

Office held	Name	Street or P.O. Address	City	State	Zip
MANAGER	JACK T. RIGGS	927 E. POLSTON #303	POST FALLS,	ID	83854

5. Organized Under the Laws of:
IDAHO
W 59077

6.

Signature

Name

(Typed or
Printed)

JACK RIGGS

Date

1/15/08

Title

MANAGER

200802007941

Issued 12/03/2007

Do Not Tape or Staple