

No. <b>C 113884</b>		<b>Due no later than Feb 28, 2010</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  MICHELE L. BOYER, M.D., CHARTERED 413 N ALLUMBAUGH STE 101 BOISE ID 83704-9219 USA		MICHELE L. BOYER 413 N ALLUMBAUGH STE 101 BOISE ID 83704-9219			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				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	MICHELE L BOYER	413 N ALLUMBAUGH STE 101	BOISE	ID	USA	83704-9219	
5. Organized Under the Laws of:  <b>ID</b> <b>C 113884</b>		6. Annual Report must be signed.*  Signature: Jennifer Burch Name (type or print): Jennifer Burch  Date: 12/28/2009 Title: Business Manager					
Processed 12/28/2009 * Electronically provided signatures are accepted as original signatures.							