

No. W 39617

Due no later than May 31, 2009
Annual Report Form

2. Registered Agent and Office **NO PO BOX**

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

AMMON MEDICAL AND URGENT CARE, PLLC
TERRY N AMIEL MD
3456 E 17TH ST STE 125
AMMON, ID 83406

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3456 E 17TH ST STE 125
AMMON, ID 83406

**NO FILING FEE IF
RECEIVED BY DUE DATE**

3. New Registered Agent Signature

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

Office held	Name	Street or P.O. Address	City	State	Zip
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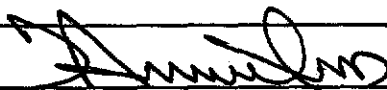
Managing Member	Terry N. Amiel	3456 E 17 th Street #125	Ammon	ID	83406
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5. Organized Under the Laws of:

IDAHO
W 39617

6.

Signature



Date

3.25.09

Name (Typed or Printed)

Terry N Amiel

Title

MD

Issued 03/02/2009

Do Not Tape or Staple

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