

No. W 4950	Due no later than November 30, 2005 Annual Report Form		2. Registered Agent and Office NO PO BOX JAMES L WARD 1717 ARLINGTON AVE. CALDWELL, ID 83605																								
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable GEM-STATE ANESTHESIA SERVICES, PLLC JAMES L WARD 1717 ARLINGTON AVE. CALDWELL, ID 83605		3. <u>New</u> Registered Agent Signature																								
4. Limited Liability Companies: Enter Names and Addresses of Members. <table style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Office held</th> <th style="text-align: left; border-bottom: 1px solid black;">Name</th> <th style="text-align: left; border-bottom: 1px solid black;">Street or P.O. Address</th> <th style="text-align: left; border-bottom: 1px solid black;">City</th> <th style="text-align: left; border-bottom: 1px solid black;">State</th> <th style="text-align: left; border-bottom: 1px solid black;">Zip</th> </tr> </thead> <tbody> <tr> <td>PARTNER</td> <td>MATTHEW J WOOD</td> <td>1717 ARLINGTON AVE.</td> <td>CALDWELL, ID</td> <td></td> <td>83605</td> </tr> <tr> <td>PARTNER</td> <td>ROBERT TAYLOR</td> <td>1717 ARLINGTON AVE</td> <td>CALDWELL, ID</td> <td></td> <td>83605</td> </tr> <tr> <td>MANAGING PARTNER</td> <td>JAMES L. WARD</td> <td>1717 ARLINGTON AVE</td> <td>CALDWELL, ID</td> <td></td> <td>83605</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	PARTNER	MATTHEW J WOOD	1717 ARLINGTON AVE.	CALDWELL, ID		83605	PARTNER	ROBERT TAYLOR	1717 ARLINGTON AVE	CALDWELL, ID		83605	MANAGING PARTNER	JAMES L. WARD	1717 ARLINGTON AVE	CALDWELL, ID		83605
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5. Organized Under the Laws of: <div style="text-align: center;">IDAHO W 4950</div>		6. <table style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width: 60%;">Signature <u>James L. Ward</u></td> <td style="width: 40%;">Date <u>9/8/05</u></td> </tr> <tr> <td>Name (Typed or Printed) <u>JAMES L. WARD</u></td> <td>Title <u>MD</u></td> </tr> </table>		Signature <u>James L. Ward</u>	Date <u>9/8/05</u>	Name (Typed or Printed) <u>JAMES L. WARD</u>	Title <u>MD</u>																				
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