

No. L 3228

Due no later than November 30, 2007

## 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

PETER AND RHONDA ZIMMERMAN FAMILY L  
PETER C. ZIMMERMAN, M.D.  
1449 E. 17TH ST.  
IDAHO FALLS, ID 83404PETER C. ZIMMERMAN, M.D.  
1449 E. 17TH ST.  
IDAHO FALLS, ID 83404NO FILING FEE IF  
RECEIVED BY DUE DATE3. New Registered Agent Signature

4. Limited Partnerships: Enter Names and Business Addresses of General Partners.

Office heldNameStreet or P.O. AddressCityStateZip

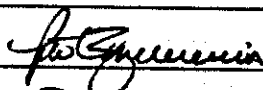
President Peter C. Zimmerman MD 335 Ranch Dr Idaho Falls Id 83404

5. Organized Under the Laws of:

IDAHO  
L 3228

6.

Signature



Date

9/24/07

Name

(Typed or  
Printed)

Peter C. Zimmerman

Title

President

Issued 09/04/2007

Do Not Tape or Staple

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