No. C 119745		Due no later than Jun 30, 2012		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed.		420 N 2ND A	BRUCE W HONSINGER MD 420 N 2ND AVE STE 200 SANDPOINT ID 83864 3. New Registered Agent Signature:*			
		SANDPOINT WOMEN'S HEALTH, P.A. JAMIE L BOCKNESS 420 N 2ND AVE STE 200 SANDPOINT ID 83864 USA						
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Nar	mes and Busin	ess Addresses of Pr	esident, Secretary, and Directors. Treas	surer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
TREASURER	CAMILLE M SANTARPIO		420 N 2ND AVE STE 200	SANDPOINT	ID	USA	83864	
SECRETARY DEBORAH H		OWEN	420 N 2ND AVE STE 200	SANDPOINT	ID	USA	83864	
PRESIDENT	BRUCE W H	ONSINGER	420 N 2ND AVE STE 200	SANDPOINT	ID	USA	83864	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 119745		Signature: Jamie L Bockness			Date: 06/06/2012			
		Name (type or p		Title: Administrator				
Processed 06/06/2012 * Electronically provided signatures are accepted as original signatures.							-	