

No. C 149317	Due no later than May 31, 2009 Annual Report Form	2. Registered Agent and Address (NO PO BOX)				
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 needed. IDAHO SURGICENTER, INC. CHAR BARNARD PO BOX 2067 POCATELLO ID 83206-2067	CHAR BARNARD 1730 HILLCREST AMERICAN FALLS ID 83211				
		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	DAVID K CROSHAW DPM	1155 POCATELLO CRK RD	POCATELLO	ID	USA	83201
SECRETARY	DARIN G GAMBLES DPM	1155 POCATELLO CRK RD	POCATELLO	ID	USA	83201
DIRECTOR	CHAR BARNARD	PO BOX 2067	POCATELLO	ID	USA	83206-2067
5. Organized Under the Laws of: ID C 149317	6. Annual Report must be signed.* Signature: Char Barnard Name (type or print): Char Barnard		Date: 06/08/2009 Title: Director			
Processed 06/08/2009		* Electronically provided signatures are accepted as original signatures.				