

No. W 26431

**Due no later than October 31, 2008
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

CHER JACOBSEN, M.D., PLLC
801 E MEDICAL CT
POST FALLS, ID 83854

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

3. New Registered Agent Signature

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

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
manager	Cher Jacobsen	801 E medical Ct	Post Falls	ID	83854

5. Organized Under the Laws of:

6.

Signature

Date

8-18-08