

No. W 23684

Due no later than April 30, 2007

Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

IDAHO SURGICENTER NORTH, LLC
3369 MERLIN DR
IDAHO FALLS, ID 83404

~~CHARLES GALL~~ *Tony D. Quinton*
3369 MERLIN DR
IDAHO FALLS, ID 83404

NO FILING FEE IF
RECEIVED BY DUE DATE

3. New Registered Agent Signature

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

Office held

Name

Street or P.O. Address

City

State

Zip

owner *Tony D. Quinton* *P.O. Box 1386* *Idaho Falls, ID* *83403*

5. Organized Under the Laws of:

IDAHO
W 23684

6.

Signature

Date

2-12-07

Name (Typed or Printed)

Tony D. Quinton

Title

Owner

Issued 02/01/2007

Do Not Tape or Staple

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