

No. C 84750

Due no later than September 30, 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

AVERY L. SEIFERT, M.D., P.A.  
AVERY L. SEIFERT, M.D.  
222 NORTH 2ND, SUITE 445 570 N, 2nd  
BOISE, ID 83702 Suite 103

AVERY L. SEIFERT, M.D.  
222 NORTH 2ND, SUITE 115  
BOISE, ID 83702

3. New Registered Agent Signature

NO FILING FEE IF  
RECEIVED BY DUE DATE

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

Office held	Name	Street or P.O. Address	City	State	Zip
President	Avery L. Seifert	117 W Shepland Dr	Boise	Id	83702
Sec/Treas.	Susan B. Seifert	117 W Shepland Dr	Boise	Id	83702

5. Organized Under the Laws of:  
IDAHO  
C 84750

6.

Signature

Date

11/4/08

Name (Typed or Printed)

Avery L Seifert

Title

Pres.

Issued 07/01/2008

Do Not Tape or Staple

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