

No. C 119745

Due no later than June 30, 2006

Annual Report Form

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 applicable

SANPOINT WOMEN'S HEALTH, P.A.
420 N 2ND AVE STE 200
SANPOINT, ID 83864

2. Registered Agent and Office NO PO BOX

BRUCE W HONSINGER MD
420 N 2ND AVE STE 200
SANPOINT, ID 83864

3. New Registered Agent Signature

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

Office held	Name	Street or P.O. Address	City	State	Zip
PRES.	BRUCE W. HONSINGER	420 N. 2 AV	SANPOINT	ID	83864
SEC.	DEBORAH H. OWEN	420 N. 2 AV	SANPOINT	ID	83864

5. Organized Under the Laws of:

IDAHO
C 119745

6.

Signature

(Typed or
Printed)

Name BRUCE W. HONSINGER Title PRES

Date 4-24-06

Issued 04/03/2006

Do Not Tape or Staple

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