

No. <b>W 77993</b>		Due no later than Sep 30, 2010 <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b> KOOTENAI SURGERY ASSOCIATES, PLLC MINDY GALBRAITH 700 IRONWOOD DR STE 304 COEUR D ALENE ID 83814 USA		TIMOTHY T QUINN MD 700 IRONWOOD DR STE 304 COEUR D'ALENE ID 83814			
				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER	MARCUS TORGENSON	PO BOX 3550	POST FALLS	ID	USA	83877-3550	
MEMBER	MICHAEL MAY	3284 N ALTA COURT	COEUR D ALENE	ID	USA	83815	
MEMBER	PHILIP KLADAR	2013 E WOODSTONE DR	HAYDEN LAKE	ID	USA	83835	
MEMBER	ROBERT G HOLMAN	5894 E ENGLISH POINT RD	HAYDEN LAKE	ID	USA	83835	
MEMBER	EDWARD G DETAR	923 S RUBY RD	COEUR D ALENE	ID	USA	83814	
MEMBER	TIMOTHY T QUINN	210 LAKEVIEW DR	COEUR D ALENE	ID	USA	83814	
5. Organized Under the Laws of: <b>ID W 77993</b>		6. Annual Report must be signed.* Signature: Jan Bourget Name (type or print): Jan Bourget Date: 07/30/2010 Title: Accountant					
Processed 07/30/2010		* Electronically provided signatures are accepted as original signatures.					