

No. W 12144		Due no later than Jun 30, 2017 Annual Report Form		2. Registered Agent and Address (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 needed. VALLEY PATHOLOGY ASSOCIATES, PLLC JOHN B. GRAY 832 CANYON RIM RD TWIN FALLS ID 83301		JOHN GRAY 832 CANYON RIM RD TWIN FALLS ID 83301			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name JOHN GRAY	Street or PO Address 832 CANYON RIM RD		City TWIN FALLS	State ID	Country	Postal Code 83301
5. Organized Under the Laws of: ID W 12144		6. Annual Report must be signed.* Signature: John B. Gray M.D. Name (type or print): John B. Gray M.D. Date: 04/28/2017 Title: Managing Partner					
Processed 04/28/2017 * Electronically provided signatures are accepted as original signatures.							