0.400044		
No. C 128511	Due no later than April 30, 2008 Annual Report Form	2. Registered Agent and Office NO PO BOX
SECRETARY OF STATE	1. Mailing Address - Correct in this box, if applicable 4	ROBERT W BOHUS MD 755 HOSPITAL WAY A-4
450 NORTH FOURTH STREET PO BOX 63720 BOISE, ID 83720-0080	ROBERT W. BOHUS, M.D., F.A.C.S., P. ROBERT W BOHUS, M.D. 500 S 11TH AVE STE 301 POCATELLO, ID 83201	POCATELLO, ID 83201
NO FILING FEE IF RECEIVED BY DUE DATE		3. New Registered Agent Signature
 Corporations: Enter Name 	es and Business Addresses of President, Secretar	a and Direct
Office held Name	Street or P.O. Address	
	<u> </u>	State ZIp
PRESIDENT ROBE	PTW. BOHUS 5005 11th Ave, sk	301 Pocak110,10 83201
SECRETARY BETTI	BOHUS 500 S. 11th Ave., ste?	301 Pocatllo, 10 83201
5. Organized Under the Laws of:	6.	
IDAHO C 128511	Signature Culc Sol	
·	Name Printed ROBERT W. BOHU	Title PRESIDENT
Issued 02/01/2008	Do Not Tape or Staple	200804002375