

No. <b>C 155790</b>		<b>Due no later than Jul 31, 2013</b> <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>  R. BURKE ARCHIBALD, M.D., P.A. R BURKE ARCHIBALD MD 100 E IDAHO ST #400 BOISE ID 83712		BART W HARWOOD 101 S CAPITOL BLVD STE 1400 BOISE ID 83702			
						3. <u>New</u> Registered Agent Signature:*	
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors, Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
SECRETARY	LISA A ELORRIETA	100 E IDAHO ST #400	BOISE	ID	USA	83712	
DIRECTOR	R BURKE ARCHIBALD, MD	100 E IDAHO ST #400	BOISE	ID	USA	83712	
PRESIDENT	R BURKE ARCHIBALD	100 E IDAHO ST #400	BOISE	ID	USA	83712	
5. Organized Under the Laws of:  <b>ID</b> <b>C 155790</b>		6. Annual Report must be signed.*  Signature: Matthew Chasan Name (type or print): Matthew Chasan					
		Date: 08/22/2013 Title: Bookkeeper					
Processed 08/22/2013      * Electronically provided signatures are accepted as original signatures.							