No. C 55791

Return to:
SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

NO FILING FEE IF RECEIVED BY DUE DATE

Due no later than June 30, 2007
Annual Report Form

1. Mailing Address - Correct in this box, if applicable

PRIEST LAKE EMERGENCY MEDICAL TECHN
27929 HWY 57
PRIEST LAKE, ID 83856

2. Registered Agent and Office NO PO BOX

LANI ELDORE
481 OUTLET BAY RD
PRIEST LAKE, ID 83856

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
PRESIDENT	JAMIESON, DOUG	51 PARADISE LANE	PRIEST LAKE	ID	83856
V. PRES	EKLER, BOB	PO BOX 420	NORDMAN	ID	83848
DIRECTOR	HOLLYCROSS, TRAVIS	209 SHADYPINES	PRIEST LAKE	ID	83856
DIRECTOR	ELDORE, KEN	29567 HWY 57	PRIEST LAKE	ID	83856
DIRECTOR	TROUP, JIM	29073 HWY 57	PRIEST LAKE	ID	83856

5. Organized Under the Laws of:
IDAHO
C 55791

6.
Signature _____ Date 4/11/07
Name (Typed or Printed) LANI ELDORE Title OFFICE MNGR

200706000394

Issued 04/02/2007

Do Not Tape or Staple