No. <b>W 84087</b>		Due no later than May 31, 2011		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		COLUMN TO THE PROPERTY OF THE PERSON NAMED TO THE	JAMES K CROTTY JR			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  MEDICAL OFFICE STRATEGIES AND SOLUTIONS, LLC JAMES K CROTTY 64 DAVIS RD		CONTRACTOR CONTRACTOR CONTRACTOR	64 DAVIS RD SAGLE ID 83860			
		SAGLE ID 83860		3. <u>New</u> Regist	3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	nies: Enter Na	mes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER JAMES K CF		ROTTY	64 DAVIS RD	SAGLE	ID	USA	83860	
5. Organized Under the Laws of:		6. Annual Report r	nust be signed.*					
ID W 84087		Signature: James K Crotty		Date	Date: 04/05/2011			
		Name (type or print): James K Crotty		Title	Title: Managing Member			
Processed 04/05/2011 * Electronically provided signatures are accepted as original signatures.								