No. <b>W 82382</b>	D	Due no later than Mar 31, 2010 Annual Report Form  1. Mailing Address: Correct in this box if needed.  MADISON PHYSICIANS INVESTMENT LLC 544 PARTRIDGE LANE REXBURG ID 83440  mes and Addresses of at least one Member or Manager.		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	MADISON PH 544 PARTRID			WINSTON V BEARD 2105 CORONADO ST IDAHO FALLS ID 83404			
NO FILING HEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
200 90 0	Names and Address	11.9	C:L.	Ct-t-	Carratur	Destal Cada	
Office Held Name  MEMBER JEFFREY  MEMBER DANE DI	HANCOCK CKSON	Street or PO Address 544 PARTRIDGE LN. 544 PARTRIDGE LN	City REXBURG REXBURG	State ID ID	Country USA USA	Postal Code 83440 83440	
<b>DE</b> Signature: Wir		rt must be signed.* /inston V. Beard		te: 06/02/20	010		
Processed 06/02/2010		Name (type or print): Winston V. Beard  * Electronically provided signatures are accepted as original signatures.					