No. <b>C 154971</b>		Due no later than Jun 30, 2016		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			JOHN GREER			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed.			2855 E MAGIC VIEW DR MERIDIAN ID 83642			
		IDAHO UROLOGIC INSTITUTE, P.A. GREGORY S FELTENBERGER 2855 E MAGIC VIEW DR MERIDIAN ID 83642			3. New Registered Agent Signature:*			
				or <u>i.e.r.</u> regiote.				
4. Corporations: Enter N	lames and Busin	ess Addresses of Pre	sident, Secretary, and Directors. Treas	urer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
TREASURER	CYNTHIA A	FAIRFAX, MD	2855 E. MAGIC VIEW DR.	MERIDIAN	ID	USA	83642	
DIRECTOR	JOHN GREER, MD		2855 E. MAGIC VIEW DR.	MERIDIAN	ID	USA	83642	
PRESIDENT	TODD WALDMANN, MD		2855 E. MAGIC VIEW DR.	MERIDIAN	ID	USA	83642	
SECRETARY	CYNTHIA A	FAIRFAX, MD	2855 E. MAGIC VIEW DR.	MERIDIAN	ID	USA	83642	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: GREGORY FELTENBERGER		Date: 04	Date: 04/25/2016			
C 154971		Name (type or print): GREGORY FELTENBERGER Title: CHIEF EXECUTIVE OFFICER					ER	
Processed 04/25/2016		* Electronically prov	ided signatures are accepted as origina	l signatures.				