

No. W 4299	Due no later than Jun 30, 2010 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: 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. BRUYA FAMILY LLC TIMOTHY E BRUYA, M.D. 3249 S HIGH DR SPOKANE WA 99203-1336 USA		LUKINS & ANNIS, P.S. 601 E FRONT AVE STE 502 COEUR D'ALENE ID 83814			
			3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MEMBER	TIMOTHY E BRUYA, M.D.	3249 S HIGH DR	SPOKANE	WA	USA	99203
5. Organized Under the Laws of: WA W 4299		6. Annual Report must be signed.* Signature: Margaret Bruya Name (type or print): Margaret Bruya		Date: 04/21/2010 Title: Member		
Processed 04/21/2010		* Electronically provided signatures are accepted as original signatures.				