

No. <b>W 39617</b>		<b>Due no later than May 31, 2006</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b> AMMON MEDICAL AND URGENT CARE, PLLC TERRY N AMIEL MD 3456 E 17TH ST STE 125 AMMON ID 83406		TERRY N AMIEL MD 3456 E 17TH ST STE 125 AMMON ID 83406	
				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	TERRY N AMIEL MD	3456 E 17TH ST STE 125	AMMON	ID	83406
5. Organized Under the Laws of:  <b>IDAHO W 39617</b>		6. Annual Report must be signed.* Signature: Terry N. Amiel Name (type or print): Terry N. Amiel Date: 06/08/2006 Title: President			
Processed 06/08/2006		* Electronically provided signatures are accepted as original signatures.			