

No. W 8772	Due no later than May 31, 2009 Annual Report Form	2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable	CHRISTINE GRAVIET 6051 N EAGLE BOISE, ID 83713 3. <u>New</u> Registered Agent Signature
	PODIATRY CENTER OF IDAHO, PLLC CHRISTINE GRAVIET 6051 N EAGLE BOISE, ID 83713	

4. Limited Liability Companies: Enter Names and Addresses of Managers.

Office held	Name	Street or P.O. Address	City	State	Zip
PRES.	GARY MILLWARD	6051 N Eagle Rd	Boise	ID	83713
SECT	SLOTT GRAVIET	" "	" "	" "	" "

5. Organized Under the Laws of: IDAHO W 8772	6. Signature <u>Christine</u> Date <u>3/18/09</u> Name (Type or Printed) <u>Christine Gravier</u> Title <u>Administrator</u>
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