

No. W 25850

Due no later than September 30, 2008
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

1. Mailing Address - Correct in this box, if applicable

GOODING FAMILY PHYSICIANS, PLLC
REID W LOFGRAH
134 WEST 4TH AVE
GOODING, ID 83330IAN KUNZ
134 WEST 4TH AVE
GOODING, ID 83330NO FILING FEE IF
RECEIVED BY DUE DATE3. New Registered Agent Signature

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

Office held	Name	Street or P.O. Address	City	State	Zip
OWNER	REID W. LOFGRAH	134 W. 4TH AVE.	GOODING	ID	83330
OWNER	IAN B. KUNZ	134 W. 4TH AVE.	GOODING	ID	83330

5. Organized Under the Laws of:
IDAHO
W 25850

6.

Signature

Date

7-14-08

Name (Typed or Printed)

IAN B. KUNZ

Title

OWNER

Issued 07/01/2008

Do Not Tape or Staple

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