

No. <b>C 149942</b>		<b>Due no later than Jul 31, 2008</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>1. Mailing Address: Correct in this box if needed.</b> FAMILY PHYSICAL THERAPY & SPORTS MEDICINE CLINIC, INC. DAVE B LITTLE 834 FALLS AVE STE 1250 TWIN FALLS ID 83301		DAVID B LITTLE 834 FALLS AVE STE 1250 TWIN FALLS ID 83301			
				3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	DAVID B LITTLE	834 FALLS AVE SUITE 1250	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of:  <b>ID C 149942</b>		6. Annual Report must be signed.* Signature: Dave Little Name (type or print): Dave Little Date: 08/05/2008 Title: Owner/therapist					
Processed 08/05/2008		* Electronically provided signatures are accepted as original signatures.					