

No. W 2386	Due no later than May 31, 2004 Annual Report Form		2. Registered Agent and Office NO PO BOX CHRISTINE GRAVIET 1400 W BANNOCK ST BOISE, ID 83702	
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 applicable BOISE CENTER FOR FOOT SURGERY, P.L. 1400 W BANNOCK ST BOISE, ID 83702		3. <u>New</u> Registered Agent Signature	
4. Limited Liability Companies: Enter Names and Addresses of Managers.				
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>
PRES.	GARY J. MILLWARD	1400 W. BANNOCK BOISE, ID 83702	BOISE	ID 83702
5. Organized Under the Laws of: IDAHO W 2386			6. Signature <u>Chavit</u> Date <u>3/15/04</u> Name <small>(Typed or Printed)</small> <u>Christine Graviat</u> Title <u>Administrator</u>	