No. C 45733		Due	2. Registered	2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		MICHAEL T	MICHAEL TULLIS 333 N 1ST ST STE 280 BOISE ID 83702 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.		101 - 11 - 12 - 12 - 12 - 12 - 12 - 12 -				
		CARDIOVASCULAR & CHEST SURGICAL ASSOCIATES, P.A. DONNA HESGARD 333 NORTH FIRST ST, #280 BOISE ID 83702		Α.				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Name	es and Busin	ess Addresses of P	resident, Secretary, and Directors. Treasu	ırer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
TREASURER PHILIPPE A		MASSER	333 N 1ST ST. #280	BOISE	ID	USA	83702	
SECRETARY JEFFREY J G			333 N 1ST ST. #280	BOISE	ID	USA	83702	
PRESIDENT	BRIAN D MA	ATTESON	333 N 1ST ST. #280	BOISE	ID	USA	83702	
5. Organized Under the Laws of:		6. Annual Report						
ID		Signature: Mich		Date: 05/13/2010				
C 45733		Name (type or		Title: Member				
Processed 05/13/2010	* Electronically provided signatures are accepted as original signatures.							