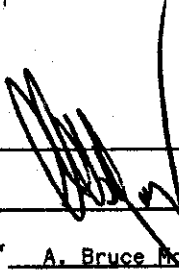


No. W 49331	Due no later than April 30, 2008 Annual Report Form		2. Registered Agent and Office NO PO BOX CT CORPORATION SYSTEM 1111 W JEFFERSON STE 530 BOISE, ID 83702 USA		
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable WEST VALLEY INTERNAL MEDICINE, LLC LEGAL DEPARTMENT ONE PARK PLAZA NASHVILLE, TN 37203		3. New 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>	<u>Zip</u>
Manager	A. Bruce Moore, Jr.	One Park Plaza	Nashville	TN	37203
Manager	Robert Samuel Hankins, Jr.	One Park Plaza	Nashville	TN	37203
Manager	R. Milton Johnson	One Park Plaza	Nashville	TN	37203
5. Organized Under the Laws of: IDAHO W 49331		6. Signature  _____ Date <u>3/25/2008</u> Name (Typed or Printed) <u>A. Bruce Moore, Jr.</u> Title <u>Manager</u>			

Issued 02/01/2008

Do Not Tape or Staple

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