

No. **W 17364**

**Due no later than December 31, 2004
Annual Report Form**

2. Registered Agent and Office **NO PO BOX**

Return to:
SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

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

NORTH IDAHO DAY SURGERY, LLC
NSH NORTH IDAHO INC
30 S WACKER DR STE 2302
CHICAGO, IL 60606

CT CORPORATION SYSTEM
300 N 6TH ST
BOISE, ID 83702

3. New Registered Agent Signature

**NO FILING FEE IF
RECEIVED BY DUE DATE**

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	NSH North Idaho, Inc.	30 S. Wacker Suite 2302	Chicago	IL	60606

5. Organized Under the Laws of:

IDAHO
W 17364

6.

Signature

Name (Typed or Printed)

Stephen M. Crumbaugh

Date

10/13/04

Title

Asst. Treasurer
NSH North Idaho, Inc.