

No. C 113748	Due no later than Feb 28, 2013 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
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 needed.		JULIE A FOOTE 3152 N 24TH WAY BOISE ID 83702			
	TREASURE VALLEY ENDOCRINOLOGY, P.C. JULIE A FOOTE 900 N LIBERTY #201 BOISE ID 83704		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
SECRETARY	LARRY L. EVANS	3152 N 24TH WAY	BOISE	ID	USA	83702
DIRECTOR	JULIE A FOOTE	3152 N 24TH WAY	BOISE	ID	USA	83702
5. Organized Under the Laws of: ID C 113748	6. Annual Report must be signed.*					
		Signature: Julie A. Foote MD	Date: 01/07/2013			
		Name (type or print): Julie A. Foote MD	Title: Physician/owner			
Processed 01/07/2013		* Electronically provided signatures are accepted as original signatures.				