

No. <b>C 130600</b>		<b>Due no later than Sep 30, 2009</b>		<b>2. Registered Agent and Address (NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>		ROBERT L CORAY, M.D. 393 E 2ND N REXBURG ID 83440			
		<b>1. Mailing Address: Correct in this box if needed.</b> ROBERT L. CORAY, M.D. & ASSOCIATES, P.A. ROBERT L CORAY, M.D. 393 E 2ND N REXBURG ID 83440		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	RALENE L REDFORD	393 E 2ND N	POCATELLO	ID	USA	83201	
PRESIDENT	ROBERT L CORAY	393 E 2ND N	REXBURG	ID	USA	83201	
5. Organized Under the Laws of:  <b>ID C 130600</b>		6. Annual Report must be signed.* Signature: Robert L. Coray Name (type or print): Robert L. Coray Date: 07/21/2009 Title: Owner					
Processed 07/21/2009		* Electronically provided signatures are accepted as original signatures.					