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| No. W 165342 | | Due no later than Apr 30, 2017 | | 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 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. HOSPITAL MEDICINE ASSOCIATES, LLC KELLY GREANEY 265 BROOKVIEW CENTRE WY STE 400 KNOXVILLE TN 37919 | | CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713 | |
| | | | | 3. <u>New</u> Registered Agent Signature:* | |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager. | | | | | |
| Office Held | Name | Street or PO Address | City | State | Country Postal Code |
| MEMBER | INPHYNET CONTRACTING SERVICES, | 5870 NORTH HIATUS ROAD SUITE 200 | TAMARAC | FL | USA 33321 |
| 5. Organized Under the Laws of: FL W 165342 | | 6. Annual Report must be signed.* Signature: John R. Stair Name (type or print): John R. Stair Date: 04/07/2017 Title: Assistant Secretary | | | |
| Processed 04/07/2017 | | * Electronically provided signatures are accepted as original signatures. | | | |