

No. W 87501		Due no later than Oct 31, 2011		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. NORTH IDAHO SURGERY, PLLC JOHN P LUNDEBY 3741 W FAIRWAY DR COEUR D'ALENE ID 83815 USA		JOHN P LUNDEBY M.D. 3741 W FAIRWAY DR COEUR D'ALENE ID 83815	
				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	JOHN P LUNDEBY	3741 WEST FAIRWAY DRIVE	COEUR D'ALENE	ID	USA 83815
5. Organized Under the Laws of: ID W 87501		6. Annual Report must be signed.* Signature: John P. Lundebay, MD Name (type or print): John P. Lundebay, MD Date: 08/17/2011 Title: Member			
Processed 08/17/2011		* Electronically provided signatures are accepted as original signatures.			