No. C 146603		Due	2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			BROCK A MCCONNEHEY DO 6650 W EMERALD ST BOISE ID 83704 3. New Registered Agent Signature:*		
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. MCCONNEHEY FAMILY MEDICINE, CHTD. BROCK A MCCONNEHEY DO 6650 W EMERALD BOISE ID 83704-8857		BOISE ID			
NO FILING FEE IF RECEIVED BY DUE DATE		50.52 15 03.					
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 DIANE MCCONNEHEY PRESIDENT BROCK A MCCONNEHEY		6650 W. EMERALD ST 6650 W. EMERALD ST	BOISE BOISE	ID ID	USA USA	83704-8857 83704-8857	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID C 146603		Signature: Dia		Date: 11/30/2009			
		Name (type or		Title: Secretary			
Processed 11/30/2009 * Electronically provided signatures are accepted as original signatures.							