

No. W 59078

Due no later than February 29, 2008  
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:  
SECRETARY OF STATE  
450 NORTH FOURTH STREET  
PO BOX 83720  
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

NORTH IDAHO IMMEDIATE CARE, PLLC  
JACK T RIGGS MD  
927 E POLSTON AVE #303  
POST FALLS, ID 83854

JACK T RIGGS MD  
927 E POLSTON AVE #303  
POST FALLS, ID 83854

NO FILING FEE IF  
RECEIVED BY DUE DATE

3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Managers.

Office held

Name

Street or P.O. Address

City

State

Zip

MANAGER JACK T. RIGGS 927 E. POLSTON POST FALLS, ID 83854  
#303

5. Organized Under the Laws of:

IDAHO  
W 59078

6.

Signature

Date

2/1/08

Name (Typed or Printed)

JACK RIGGS

Title

MANAGER

Issued 12/03/2007

Do Not Tape or Staple

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