No. C 144349		Due no later than Jun 30, 2009		2. Registe	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		200000000000000000000000000000000000000	PATRICK J MILLER ESQ			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. CARDIOVASCULAR CONSULTANTS OF IDAHO, P.A. GINGER MCCABE 1070 N CURTIS STE 125 BOISE ID 83706 USA			601 W BANNOCK BOISE ID 83702			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Re	3. New Registered Agent Signature:*			
4. Corporations: Enter Nan	nes and Busin	ess Addresses of Presid	dent, Secretary, and Directors. Treas	surer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY PRESIDENT	CHARLES M. RASMUSSEN, MD STEVEN J FONKEN, MD		1070 N CURTIS STE 125 1070 N. CURTIS STE 125	BOISE BOISE	ID ID	USA USA	83706 83706	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Ginger McCabe		Date	Date: 04/13/2009			
C 144349		Name (type or print): Ginger McCabe		Title	Title: Practice Administrator			
Processed 04/13/2009 * Electronically provided signatures are accepted as original signatures.								