

No. W 62116	Due no later than Apr 30, 2012 Annual Report Form		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	1. Mailing Address: Correct in this box if needed. NORTHWEST MEDICAL TRANSPORT, LLC REBEKAH A GAY 1250 IRONWOOD DR SUITE 303 COEUR D' ALENE ID 83814 USA		REBEKAH A GAY 1713 S SADDLEBACK DR COEUR D'ALENE ID 83814			
			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	REBEKAH A GAY	1713 S SADDLEBACK DR	COEUR D ALENE	ID	USA	83814
MEMBER	CHARLES A GAY	1713 S SADDLEBACK DR	COEUR D ALENE	ID	USA	83814
5. Organized Under the Laws of: ID W 62116	6. Annual Report must be signed.* Signature: Charles Gay Name (type or print): Charles Gay		Date: 02/09/2012 Title: Member			
Processed 02/09/2012		* Electronically provided signatures are accepted as original signatures.				