

No. W 514

Due no later than September 30, 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)

SOUTHWAY INTERNISTS P.L.L.C.
JUDY HARRIS
222 SOUTHWAY STE C
LEWISTON, ID 83501

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222 SOUTHWAY STE C
LEWISTON, ID 83501

NO FILING FEE IF
RECEIVED BY DUE DATE

3. New Registered Agent Signature

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

Office held	Name	Street or P.O. Address	City	State	Zip
Owner	Barbara K. DAVIS	3270 Clemens Rd	Clarkston	WA	99403
Owner	Patricia A. Brady	23946 Big Sky Lane	Lewiston	Id	83501

5. Organized Under the Laws of:
IDAHO
W 514

6.

Signature

Judy Harris

Date

7-16-2008

Name

(Typed or Printed)

Judy Harris

Title

Office Manager

Issued 07/01/2008

Do Not Tape or Staple

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