

No. W 16165

Due no later than August 31, 2006

Annual Report Form

Return to:

SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

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

MAIN STREET MEDICAL, L.L.C.
CHARLES L NEWHOUSE MD
PO BOX 1640
BONNERS FERRY, ID 83805

2. Registered Agent and Office NO PO BOX

CHARLES L NEWHOUSE
6641 KANIKSU ST STE A
BONNERS FERRY, ID 83805NO FILING FEE IF
RECEIVED BY DUE DATE3. New Registered Agent Signature

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

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
owner/ manager	Chuck Newhouse	P.O. Box 1640	Bonnerr Ferry	Idaho	83805

5. Organized Under the Laws of:

IDAHO
W 16165

6.

Signature



Date

5 Sept 2006

Name (Typed or Printed)

Chuck Newhouse

Title

Owner/Manager

Issued 06/01/2006

Do Not Tape or Staple

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