No. W 81763		Due no later than Feb 28, 2010		2. Registered /	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			JEFFREY S TAYLOR 190 E BANNOCK BOISE ID 83712 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. ST. LUKE'S CLINIC BOISE/MERIDIAN, L.L.C. JEFFREY S TAYLOR 190 E BANNOCK BOISE ID 83712		BOISE ID				
NO FILING FEE IF RECEIVED BY DUE DATE								
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 GARY L FLET		TCHER	190 E. BANNOCK	BOISE	ID	USA	83712	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Jeff		Date: 03/18/2010				
W 81763		Name (type or		Title: V.p., Cfo				
Processed 03/18/2010 * Electronically provided signatures are accepted as original signatures.								