

No. W 95099		Due no later than Jul 31, 2011		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		Annual Report Form		JILL WALKER SATREN 943 IRONWOOD DRIVE SUITE 100 COEUR D'ALENE ID 83814			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		NORTHERN IDAHO HAND REHABILITATION, PLLC ATTN JILL WALKER SATREN 101 W PRAIRIE CENTER #225 HAYDEN ID 83835 USA					
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	JILL W WALKER	101 W PRAIRIE CENTER #225	HAYDEN	ID	USA	83835	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 95099		Signature: Jill Walker Satren			Date: 05/20/2011		
		Name (type or print): Jill Walker Satren			Title: Owner		
Processed 05/20/2011		* Electronically provided signatures are accepted as original signatures.					