

|  |                    |   |       |  |         |             |  |
|--|--------------------|---|-------|--|---------|-------------|--|
| No. <b>W 23896</b>   |                    | <b>Due no later than Apr 30, 2010</b><br><b>Annual Report Form</b>  |       | 2. Registered Agent and Address ( <b>NO PO BOX</b> )           |         |             |  |
| Return to:<br><br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 |                    | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>BOISE REHABILITATION PHYSICIANS, LLC<br>LYNN KELLEY<br>1000 N CURTIS RD # 202<br>BOISE ID 83706<br>USA |       | MICHAEL R MCMARTIN<br>1000 N CURTIS RD # 202<br>BOISE ID 83706 |         |             |  |
| <b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b>   |                    |   |       | 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   | VIC KADYAN         | 1000 N. CURTIS RD #202  | BOISE | ID   | USA     | 83706       |  |
| MEMBER   | KEVIN R KRAFFT     | 1000 N CURTIS RD #202   | BOISE | ID   | USA     | 83706       |  |
| MEMBER   | RODDE D COX        | 1000 N CURTIS RD #202   | BOISE | ID   | USA     | 83706       |  |
| MEMBER   | MICHAEL R MCMARTIN | 1000 N CURTIS RD # 202  | BOISE | ID   | USA     | 83706       |  |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 23896</b>                                 |                    | 6. Annual Report must be signed.*<br><br>Signature: Michael McMartin<br>Name (type or print): Michael McMartin  |       |  |         |             |  |
|  |                    | Date: 02/10/2010<br>Title: Member   |       |  |         |             |  |
| Processed 02/10/2010 * Electronically provided signatures are accepted as original signatures.     |                    |   |       |  |         |             |  |