No. C 146430		Due no later than Nov 30, 2009		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. SAINT ALPHONSUS PHYSICIANS, P.A. J ROBERT POLK MD 1055 N CURTIS BOISE ID 83706		601 W BANI BOISE ID	PATRICK J MILLER ESQ 601 W BANNOCK ST BOISE ID 83701 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		and Addresses of	Duscident Cosystems and Directors Trans	nuncy (ontional)				
Office Held	Name	ess Addresses of	President, Secretary, and Directors. Treas Street or PO Address	City	State	Country	Postal Code	
SECRETARY PRESIDENT	RICHARD PRESNELL J. ROBERT POLK, M.D.		1055 N. CURTIS RD. 1055 N. CURTIS RD.	BOISE BOISE	ID ID	USA USA	83706 83706	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 146430		Signature: J. Robert Polk, M.D. Name (type or print): J. Robert Polk, M.D.			Date: 11/02/2009 Title: President & Director, SAP, PA			
Processed 11/02/2009 * Electronically provided signatures are accepted as original signatures.								