

No. <b>W 37853</b>		<b>Due no later than Mar 31, 2009</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  MIDDLETON HEALTH CARE, LLC DARIN J TAYLOR 509 S. MIDDLETON RD. SUITE 105 MIDDLETON ID 83644		MIDDLETON PLANNING AND DESIGN INC 509 S MIDDLETON RD #105 MIDDLETON ID 83644			
<b>NO FILING FEE IF 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	
MANAGER	MIDDLETON PLANNING & DESIGN INC	509 S. MIDDLETON RD. SUITE 105	MIDDLETON	ID	USA	83644	
5. Organized Under the Laws of:  <b>ID</b> <b>W 37853</b>		6. Annual Report must be signed.*  Signature: Darin J. Taylor Name (type or print): Darin J. Taylor					
		Date: 01/16/2009 Title: Owner					
Processed 01/16/2009		* Electronically provided signatures are accepted as original signatures.					