

No. <b>C 121767</b>		<b>Due no later than Dec 31, 2012</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>  BOISE BASIN INFERTILITY AND GYNECOLOGY, P.A. KATHLEEN BEYNUN 811 N 6TH ST BOISE ID 83702 USA		PHILIP M KRUEGER, MD, PHD 811 N 6TH ST BOISE ID 83702			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
VICE PRESIDENT	ALLYN M. KRUEGER	1311 WARMSPRINGS AVE	BOISE	ID	USA	83712	
PRESIDENT	PHILIP M KRUEGER	1311 WARMSPRINGS AVE	BOISE	ID	USA	83712	
5. Organized Under the Laws of:  <b>ID</b> <b>C 121767</b>		6. Annual Report must be signed.*  Signature: Philip M Krueger Name (type or print): Philip M Krueger					
Processed 10/18/2012		* Electronically provided signatures are accepted as original signatures.  Date: 10/18/2012 Title: President					