

No. W 31874		Due no later than Jul 31, 2016		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 1. Mailing Address: Correct in this box if needed. PHOENIX RADIOLOGY PLLC 531 4TH AVE LEWISTON ID 83501		CHARLES A BROWN 324 MAIN ST LEWISTON ID 83501	
				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	PAUL J SANCHIRICO	531 4TH AVE	LEWISTON	ID	83501
MEMBER	MARK J TERRY MD	531 FOURTH AVE	LEWISTON	ID	83501
MEMBER	GREG SPURLING	531 4TH AVE	LEWISTON	ID	USA 83501
5. Organized Under the Laws of: ID W 31874		6. Annual Report must be signed.* Signature: LISA DESSING Name (type or print): LISA DESSING Date: 05/24/2016 Title: OFFICE MANAGER			
Processed 05/24/2016		* Electronically provided signatures are accepted as original signatures.			