No. <b>C 90312</b>		Due no later than Sep 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.  IDAHO MEDICAL GROUP MANAGEMENT ASSOCIATION, INC.  SHERI SASS PO BOX 140357		6057 N CA BOISE ID	SHERI SASS 6057 N CASTLETON LN BOISE ID 83714			
NO FILING FEE IF RECEIVED BY DUE DATE		BOISE ID 83714 USA  ness Addresses of President, Secretary, and Directors. Treasurer (			3. New Registered Agent Signature:*			
0.0	ls and busin Name	ess Addi esses Of	Street or PO Address	City	State	Country	Postal Code	
SECRETARY E	BRAD TURPIN ANTHONY SCHIRER		PO BOX 140357 PO BOX 140357	BOISE BOISE	ID ID	USA USA	83714 83714	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 90312		Signature: Sheri Sass Name (type or print): Sheri Sass			Date: 09/30/2009 Title: Executive Director			
Processed 09/30/2009 * Electronically provided signatures are accepted as original signatures.								