No. W 35248		Due no later than Dec 31, 2011		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		JOHN P LUI	JOHN P LUNDEBY			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. LAKE CITY SURGEONS, PLLC KEVIN M JOHNSON 608 NW BLVD STE 301 COEUR D ALENE ID 83814 USA			608 NW BLVD STE 301 COEUR D'ALENE ID 83814			
				COEUR D'ALI				
				3. New Registe	3. New Registered Agent Signature:*			
4. Limited Liability Co	mpanies: Enter Na	mes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER MEMBER	JOHN P LUN KEVIN M JC		1025 WINDSONG LANE 705 SW STALEY DR	MOSCOW PULLMAN	ID WA	USA USA	83843 99163	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 35248		Signature: Jan Bourget			Date: 01/10/2012			
		Name (type or print): Jan Bourget			Title: Accountant			
Processed 01/10/201	2	* Electronically pro	vided signatures are accepted as origina	al signatures.				

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