

No. W 3159

Return to:
SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

**NO FILING FEE IF
RECEIVED BY DUE DATE**

Due no later than November 30, 2004
Annual Report Form

1. Mailing Address - Correct in this box, if applicable

IDaho NEPHROLOGY SUPPLY, LLC
5610 W GAGE ST STE B
BOISE, ID 83706

2. Registered Agent and Office **NO PO BOX**

PATRICK J MILLER
277 N 6TH ST STE 200
BOISE, ID 83702

3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Members.

Office held Name

Street or P.O. Address

City

State

Zip

Office Saint Alphonse University (ex: IN-
SÉC) Lévis Boischatel x3706

Lower Kidney Physicians of Idaho, LLC
5610 W BAKER STE #3 Boise ID 83706

5. Organized Under the Laws of:

IDAHO
W 3159

6.

Signature

Name _____ (Typed or
Printed)

Maciath Smith Date 9/14/2004

Marcia L. Smith Title Acctg Mngr