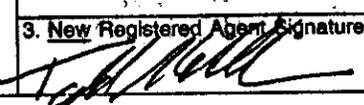
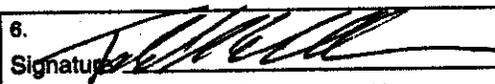


No. W 7270 Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Due no later than October 31, 2007 Annual Report Form 1. Mailing Address - Correct in this box, if applicable GRAND TETON SURGICAL CENTER, PLLC GARY W WALLACE 2290 CORONADO ST IDAHO FALLS, ID 83404	2. Registered Agent and Office NO PO BOX AARON APFLECK TODD WILLIAMS 2290 CORONADO ST IDAHO FALLS, ID 83404 3. New Registered Agent Signature 																																				
4. Limited Liability Companies: Enter Names and Addresses of Members.																																						
<table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Medical Director</td> <td>Todd Williams, MD</td> <td>2290 Coronado</td> <td>Idaho Falls</td> <td>ID</td> <td>83404</td> </tr> <tr> <td>Assistant Med Director</td> <td>GARY W. WALLACE, MD</td> <td></td> <td>"</td> <td>"</td> <td>"</td> </tr> <tr> <td>Member</td> <td>AARON J. APFLECK, MD</td> <td></td> <td>"</td> <td>"</td> <td>"</td> </tr> <tr> <td>Member</td> <td>CLINT E. BEHREND, MD</td> <td></td> <td>"</td> <td>"</td> <td>"</td> </tr> <tr> <td>Member</td> <td>PAUL M. HENDRIX, MD</td> <td></td> <td>"</td> <td>"</td> <td>"</td> </tr> </tbody> </table>			<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Medical Director	Todd Williams, MD	2290 Coronado	Idaho Falls	ID	83404	Assistant Med Director	GARY W. WALLACE, MD		"	"	"	Member	AARON J. APFLECK, MD		"	"	"	Member	CLINT E. BEHREND, MD		"	"	"	Member	PAUL M. HENDRIX, MD		"	"	"
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>																																	
Medical Director	Todd Williams, MD	2290 Coronado	Idaho Falls	ID	83404																																	
Assistant Med Director	GARY W. WALLACE, MD		"	"	"																																	
Member	AARON J. APFLECK, MD		"	"	"																																	
Member	CLINT E. BEHREND, MD		"	"	"																																	
Member	PAUL M. HENDRIX, MD		"	"	"																																	
5. Organized Under the Laws of: IDAHO W 7270	6. Signature  Name (Typed or Printed) Todd A Williams, MD Title Medical Director Date 08-22-07																																					

Issued 08/02/2007

Do Not Tape or Staple

200710004762