

No. C 54751

Due no later than December 31, 2007

Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

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

VALLEY EAR, NOSE, AND THROAT GROUP,
COLIN S DOYLE
330 WARNER DRIVE
LEWISTON, ID 83501

COLIN S. DOYLE, M.D.
330 WARNER DRIVE
LEWISTON, ID 83501

NO FILING FEE IF
RECEIVED BY DUE DATE

3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	Colin Doyle	330 Warner Dr.	Lewiston	ID	83501

5. Organized Under the Laws of:

IDAHO
C 54751

6.

Signature



Date

12/3/07

Name (Typed or Printed)

Colin Doyle

Title

President

Issued 10/01/2007

Do Not Tape or Staple

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