

No. <b>C 161319</b>		<b>Due no later than Jul 31, 2009</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b> KIMBERLY A. VORSE, M.D., P.C. KIMBERLY A VORSE PO BOX 5000 KETCHUM ID 83340 USA		KIMBERLY A VORSE MD 380 WASHINGTON AVE STE 201 KETCHUM ID 83340			
				3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	KIMBERLY A VORSE	PO BOX 5000	KETCHUM	ID	USA	83340-5000	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID C 161319</b>		Signature: Kimberly Vorse				Date: 08/10/2009	
		Name (type or print): Kimberly Vorse				Title: President	
Processed 08/10/2009		* Electronically provided signatures are accepted as original signatures.					