

No. W 34455		Due no later than Nov 30, 2006		2. Registered Agent and Address (NO PO BOX)	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. WOOD RIVER FAMILY MEDICINE, PLLC TRACEY L BUSBY 706 S. MAIN ST HAILEY ID 83333		TRACEY BUSBY MD 706 MAIN ST HAILEY ID 83333	
				3. <u>New</u> Registered Agent Signature:*	
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country Postal Code
MANAGER	TRACEY L BUSBY	706 S MAIN ST	HAILEY	ID	USA 83333
MANAGER	RICHARD PARIS	706 S. MAIN STREET	HAILEY	ID	USA 83333
MANAGER	KATHRYN WOODS	706 S. MAIN STREET	HAILEY	ID	USA 83333
MANAGER	Carl Barbee	706 S. Main Street	Hailey	ID	USA 83333
MANAGER	FRANK BATCHA	706 S. MAIN STREET	HAILEY	ID	USA 83333
5. Organized Under the Laws of: IDAHO W 34455		6. Annual Report must be signed.* Signature: Carl Barbee, Secretary Name (type or print): Carl Barbee, Secretary Date: 10/04/2006 Title: Carl Barbee Secretary			
Processed 10/04/2006		* Electronically provided signatures are accepted as original signatures.			