

No. C 166457		Due no later than Apr 30, 2009		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. PINNACLE PRACTICE MANAGEMENT ASSOCIATES, INC. TIM THROCKMORTON 806 CLEARWATER LOOP STE N POST FALLS ID 83854		PATRICK E ADAIR 806 CLEARWATER LOOP STE N POST FALLS ID 83854			
				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	
SECRETARY	ANN ADAIR	806 CLEARWATER LOOP #N	POST FALLS	ID	USA	83854	
DIRECTOR	PATRICK E ADAIR	806 CLEARWATER LOOP #N	POST FALLS	ID	USA	83854	
5. Organized Under the Laws of: ID C 166457		6. Annual Report must be signed.* Signature: Timothy A Throckmorton Name (type or print): Timothy A Throckmorton Date: 05/11/2009 Title: Cfo					
Processed 05/11/2009		* Electronically provided signatures are accepted as original signatures.					