No. C 215275		Due no later than Sep 30, 2018		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. PHYSICIANS CONSULTANTS, INC. 11605 MIRACLE HILLS DRIVE STE 200		DEAN L CAMERON, IDAHO DEPT OF 700 W STATE ST 3RD FL BOISE ID 83702 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Busine			ent Secretary and Directors Treasurer (ered Agent 31	gnature.	
Office Held	Name	ess madi esses of Treside	Street or PO Address	City	State	Country	Postal Code
PRESIDENT SECRETARY			11605 MIRACLE HILLS DRIVE STE 200 11605 MIRACLE HILLS DRIVE STE 200		NE NE		68154 68154
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
NE C 215275		Signature: Lynnette I Name (type or print)	Date: 08/02/2018 Title: President				
Processed 08/02/2018		* Electronically provided	signatures are accepted as original signal	atures.			