

No. C 121767		Due no later than Dec 31, 2015		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. BOISE BASIN INFERTILITY AND GYNECOLOGY, P.A. KATHLEEN BEYNUN 811 N 6TH ST BOISE ID 83702		PHILIP M KRUEGER, MD, PHD 811 N 6TH ST BOISE ID 83702			
				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	
VICE PRESIDENT	ALLYN M. KRUEGER	1311 WARMSPRINGS AVE	BOISE	ID	USA	83712	
PRESIDENT	PHILIP M KRUEGER	1311 WARMSPRINGS AVE	BOISE	ID	USA	83712	
5. Organized Under the Laws of: ID C 121767		6. Annual Report must be signed.* Signature: Philip Krueger Name (type or print): Philip Krueger Date: 10/20/2015 Title: President					
Processed 10/20/2015		* Electronically provided signatures are accepted as original signatures.					