No. W 12305 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Due no later than Jun 30, 2013 Annual Report Form 1. Mailing Address: Correct in this box if needed. EAGLE ORTHOPEDIC & SPORTS PHYSICAL THERAPY, P.L.L.C. CHRISTINE BLEFFERT 600 VALLEY CENTRE DR. DRIGGS ID 83422 USA mes and Addresses of at least one Member or Manager.		2. Registered	2. Registered Agent and Address (NO PO BOX) MICHAEL BLEFFERT 2596 RENDEZVOUS DR DRIGGS ID 83422 3. New Registered Agent Signature:*			
				2596 RENDI DRIGGS ID				
				3. <u>New</u> Registe				
Office Held	Name	ines and Addres.	Street or PO Address	City	State	Country	Postal Code	
MEMBER MEMBER	MICHAEL BLEFFERT CHRISTI BLEFFERT		2596 RENDEZVOUS DR. 2596 RENDEZVOUS DR.	DRIGGS DRIGGS	ID ID	USA USA	83422 83422	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 12305		Signature: Christine Bleffert		Date	Date: 06/26/2013			
		Name (type or print): Christine Bleffert		Title	Title: Managing Member			
Processed 06/26/20	13	* Electronically	provided signatures are accepted as original s	ignatures.				