

No. J 55

Due no later than January 31, 2009  
Annual Report Form

Return to:  
SECRETARY OF STATE  
450 NORTH FOURTH STREET  
PO BOX 83720  
BOISE, ID 83720-0080

**NO FILING FEE IF  
RECEIVED BY DUE DATE**

1. Mailing Address - Correct in this box, if applicable

SANPOINT PEDIATRICS, L.L.P.  
JOYCE A GILBERT MD  
420 N 2ND AVE  
SANPOINT, ID 83864

2. Registered Agent and Office NO PO BOX

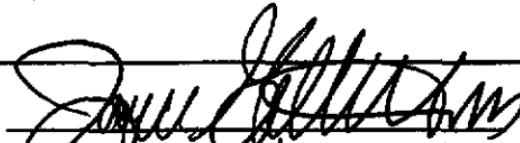
JOYCE A GILBERT MD  
420 N 2ND AVE  
SANPOINT, ID 83864

3. New Registered Agent Signature

4. Limited Liability Partnerships: Enter Names and Business Addresses of two (2) or more partners.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Partner	Joyce Gilbert	P.O. Box 912	Sandpoint	ID	83864
Partner	George Deland	1711 Janelle Way	"	"	"

5. Organized Under the Laws of:  
IDAHO  
J 55

6. Signature   
Name (Typed  
Printed) Joyce A. Gilbert MD  
Date 12/10/08  
Title Owner

Issued 11/05/2008

Do Not Tape or Staple

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