No. <b>C 42829</b>		Due no later than Sep 30, 2010		2. Registered	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.  EYE PHYSICIANS OF IDAHO, P.A.  1615 12TH AVENUE ROAD, STE B  NAMPA ID 83686		626 VIEW V NAMPA ID	PETER ERNEST JENSEN 626 VIEW WAY NAMPA ID 83686  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE  4. Corporations: Enter Names and Busine		ess Addresses of P	resident Secretary and Directors Treas	urer (ontional)				
100	Name	033 / ladi 03303 01 1 1	Street or PO Address	City	State	Country	Postal Code	
	JORGE A MARTINEZ PETER E JENSEN		1615 12TH AVE RD, STE B 1615 12TH AVE RD, STE B	nampa Nampa	ID ID	USA USA	83686 83686	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Pete		Date: 07/09/2010				
C 42829		Name (type or		Title: Presidnet				
Processed 07/09/2010		* Electronically provided signatures are accepted as original signatures.						