

No. 45730	<b>Idaho Corporation Annual Report Form</b> Due No Later Than November 1,	2. Registered Agent and Office																				
Return To  <b>Secretary of State</b> <b>Room 203, Statehouse</b> <b>Boise, ID 83720</b>  <b>** FINAL NOTICE **</b> <b>NO FEE REQUIRED</b>	1. Mailing Address — Please Correct	<b>MTB&amp;B SERVICE COMPANY</b> <b>300 1ST SECURITY BUILDING</b>  <b>BOISE ID 83702</b>																				
	<b>CARDIOVASCULAR DISEASE CLIN</b> <b>DONALD K. STOTT, M.D.</b> <b>125 EAST IDAHO, #203</b>  <b>BOISE ID 83702</b>																					
3. Incorporated Under The Laws of ID																						
NO: 045730																						
4. Names and Addresses of Officers and Directors																						
<table border="1"> <thead> <tr> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President: Donald K Stott M.D. PA</td> <td>125 E Idaho # 302</td> <td>Boise</td> <td>Idaho</td> <td>83702</td> </tr> <tr> <td>Secretary: Barbara J. Stott</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			Name	Street or P.O. Address	City	State	Zip	President: Donald K Stott M.D. PA	125 E Idaho # 302	Boise	Idaho	83702	Secretary: Barbara J. Stott					Directors:				
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Secretary: Barbara J. Stott																						
Directors:																						

5. Nature of Business

Cardiology

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature

Name (Typed or Printed)

Barbara J. Stott

Date

10/16/90

Title

Manager