

No. C 62785	Annual Report Form 1996 <i>Due No Later Than November 30,</i>	2. Registered Agent and Office NOT A P.O. BOX ALLAN R. FROST 526-H SHOUP AVENUE WEST TWIN FALLS ID 83301																								
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct FROST, WELCH & ALLAN MD, P.A. ALLAN R. FROST, MD 526-H SHOUP AVE. W	3. Organized Under the Laws of: ID C 62785																								
* FIRST NOTICE * TWIN FALLS ID 83303																										
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)																										
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 15%;">Office held</th> <th style="text-align: left; width: 25%;">Name</th> <th style="text-align: left; width: 35%;">Street or P.O. Address</th> <th style="text-align: left; width: 15%;">City</th> <th style="text-align: left; width: 10%;">State</th> <th style="text-align: left; width: 10%;">Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Allan R Frost MD</td> <td>526-H Shoup Ave W</td> <td>Twin Falls</td> <td>ID</td> <td>83301</td> </tr> <tr> <td>Vice President</td> <td>Scott E Allan MD</td> <td>526-H Shoup Ave W</td> <td>Twin Falls</td> <td>ID</td> <td>83301</td> </tr> <tr> <td>Sec-Treasurer</td> <td>Robert C Welch MD</td> <td>526-H Shoup Ave W</td> <td>Twin Falls</td> <td>ID</td> <td>83301</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	President	Allan R Frost MD	526-H Shoup Ave W	Twin Falls	ID	83301	Vice President	Scott E Allan MD	526-H Shoup Ave W	Twin Falls	ID	83301	Sec-Treasurer	Robert C Welch MD	526-H Shoup Ave W	Twin Falls	ID	83301
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5. NATURE OF BUSINESS MEDICAL DOCTORS	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 _____ Date <u>8/14/96</u> Name (Typed or Printed) <u>Allan R Frost MD</u> Title <u>President</u>																									

ISSUED: 07-03-1996

3321,