

0. C100030	Annual Report Form 1999 <i>Due No Later Than November 30,</i>		2. Registered Agent and Office NOT A P.O. BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct A-1 SAW CLINIC, INC. FLOYD SHAW PO BOX 3508 BOISE ID 83703		FLOYD SHAW 5614 W STATE ST BOISE ID 83703
			3. Organized Under the Laws of: ID C100030

Corporations: Enter Names and Business Addresses of **President, Secretary and Directors**

Limited Liability Companies: Enter Names and Addresses of ☐ **Managers** or ☐ **Members** (check one)

Office held	Name	Street or P.O. Address	City	State	Zip
PRES	FLOYD SHAW	1707 N. 27 th ST	BOISE	ID	83702
DIR	BRADLEY L. SHAW	"	"	"	"
SEC	KATHLEEN L. SHAW	"	"	"	"

Signature of New Registered Agent	6.	
	Signature <u>Kathleen L. Shaw</u> Name (Typed or Printed) <u>KATHLEEN L. SHAW</u>	Date <u>7/15/99</u> Title <u>SEC.</u>

ISSUED: 07-03-1999

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