

No. C112875	Annual Report Form Due No Later Than November 30, 1996	2. Registered Agent and Office NOT A P.O. BOX GREGORY J VIETZ 277 N 6TH ST STE 200 BOISE ID 83701
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83701 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct ROCK PATHOLOGISTS, P.A. STEVEN HENRY WILSON 2033 N GROVE DR 1055 N. CURTIS RD BOISE ID 83706 1055 N. CURTIS RD BOISE ID 83706	3. Organized Under the Laws of: ID C112875
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)		
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>
President	Steven H Wilson	1055 N. Curtis Rd
Secretary/Treasurer	Laura Lyne Wilson	1055 N. Curtis Rd
<u>City</u>	<u>State</u>	<u>Zip</u>
Boise	ID	83706
Boise	ID	83706
5. NATURE OF BUSINESS MEDICAL PRACTICE		
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 <u>Steven H Wilson</u> Date <u>12/17/96</u> Name (Typed or Printed) <u>Steven H Wilson</u> Title <u>12/26/96</u>		

ISSUED: 07-06-1996