

No. **C 128470****Due no later than April 30, 2005**
Annual Report Form2. Registered Agent and Office **NO PO BOX**

Return to:

SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080**1. Mailing Address - Correct in this box, if applicable**YOST & YOST PEDIATRICS, P.A.
CHRISTIAN C YOST D.O.
950 HOSPITAL WAY STE A
POCATELLO, ID 83201CHRISTIAN C YOST D.O.
950 HOSPITAL WAY STE A
POCATELLO, ID 83201**NO FILING FEE IF
RECEIVED BY DUE DATE**3. New Registered Agent Signature

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

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	Gentry C Yost	950 Hospital Way, Ste A	Pocatello	ID	83201
Secretary	Kara D. Yost	950 Hospital Way, Ste A	Pocatello	ID	83201

5. Organized Under the Laws of:

IDAHO
C 128470

6.

Signature Kara D Yost Date 3-28-05
Name (Typed or
Printed) Kara D. Yost Title Office Manager

Issued 02/01/2005

Do Not Tape or Staple

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