

FILED EFFECTIVE

## REINSTATEMENT

No. <b>C 150951</b>	<b>Annual Report Form</b> <b>ADMIN DISSOLVED 12/08/2004</b>		2. Registered Agent and Office <b>NOT A P.O. BOX</b>	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>FEE DUE \$30.00</b>	1. Mailing Address: (Correct in this box, if applicable)  BLAKE D. ALEXANDER, M.D., P.A.  500 S 11TH AVE STE 203  POCATELLO, ID 83201		ERIC L OLSEN 201 EAST CENTER  POCATELLO, ID 83201	
3. <u>New</u> registered agent signature				
4. Corporations: Enter Names and Business 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>	<u>City</u>	<u>State</u>
				<u>Zip</u>
President/ Treasurer	Blake D. Alexander	500 S. 11 <sup>th</sup> , Ste. 203	Pocatello	ID 83201
Secretary	Stephanie Lenson	500 S 11 <sup>th</sup> Ste. 203	Pocatello,	ID 83201
5. Organized under the laws of:  IDAHO C 150951		6. Signature <u>Stephanie Lenson</u> Date <u>1-10-05</u> Name (Typed or Printed) <u>Stephanie Lenson</u> Title <u>Secretary</u>		

Issued 01/05/2005 by KAH