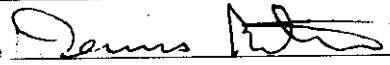
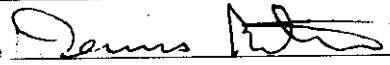
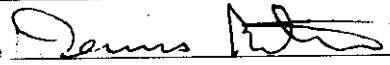


No. C 87424	Due no later than Aug 31, 2002 Annual Report Form	2. Registered Agent and Office NO PO BOX DENNIS PUTMAN 132 N RIVERSIDE DR HORSESHOE BEND, ID 83629																														
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable HORSESHOE BEND EMERGENCY MEDICAL TE PO BOX 116 HORSESHOE BEND, ID 83629	3. <u>New</u> Registered Agent Signature																														
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 15%;"><u>Office held</u></th> <th style="text-align: left; width: 25%;"><u>Name</u></th> <th style="text-align: left; width: 35%;"><u>Street or P.O. Address</u></th> <th style="text-align: left; width: 15%;"><u>City</u></th> <th style="text-align: left; width: 10%;"><u>State</u></th> <th style="text-align: left; width: 10%;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Director</td> <td>Dennis Putman</td> <td>P.O. Box 237</td> <td>Horseshoe Bend</td> <td>ID</td> <td>83629</td> </tr> <tr> <td>President</td> <td>Dennis Putman</td> <td>P.O. Box 237</td> <td>Horseshoe Bend</td> <td>ID</td> <td>83629</td> </tr> <tr> <td>Secretary</td> <td>Lori Putman</td> <td>P.O. Box 237</td> <td>Horseshoe Bend</td> <td>ID</td> <td>83629</td> </tr> <tr> <td>Vice Pres.</td> <td>Melissa Seibel</td> <td>P.O. Box</td> <td>Horseshoe Bend</td> <td>ID</td> <td>83629</td> </tr> </tbody> </table>			<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Director	Dennis Putman	P.O. Box 237	Horseshoe Bend	ID	83629	President	Dennis Putman	P.O. Box 237	Horseshoe Bend	ID	83629	Secretary	Lori Putman	P.O. Box 237	Horseshoe Bend	ID	83629	Vice Pres.	Melissa Seibel	P.O. Box	Horseshoe Bend	ID	83629
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5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO C 87424 </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Signature </td> <td style="width: 40%;">Date <u>6-21-02</u></td> </tr> <tr> <td>Name <small>(Typed or Printed)</small> <u>DENNIS PUTMAN</u></td> <td>Title <u>DIRECTOR</u></td> </tr> </table>		Signature 	Date <u>6-21-02</u>	Name <small>(Typed or Printed)</small> <u>DENNIS PUTMAN</u>	Title <u>DIRECTOR</u>																										
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