

No. C 42829

Annual Report Form
Due No Later Than November 30, 1996

Return to:
 SECRETARY OF STATE
 700 WEST JEFFERSON
 PO BOX 83720
 BOISE, ID 83720-0080
 NO FEE REQUIRED

1. Mailing Address (Please Print Clearly If Possible)

EYE PHYSICIANS OF IDAHO, P.A.
 1615 12TH AVENUE ROAD

2. Registered Agent and Office NOT A P.O. BOX

PETER ERNEST JENSEN
 626 VIEW WAY
 NAMPA ID 83651

3. Organized Under the Laws of:

ID C 42829

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

Limited Liability Companies: Enter Names and Addresses of Managers or 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	Peter E. Jensen	626 View Way	Nampa	ID	83651
Secretary	Jorge A. Martinez	926 Arguta Dr	Nampa	ID	83651

5. NATURE OF BUSINESS
 MEDICAL

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 

Date 7/17/96

Name (Type or Print) J. MARTINEZ

Title SECRETARY

ISSUED: 07-06-1996

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