

No. C 45379	Annual Report Form Due No Later Than November 30, 1997		2. Registered Agent and Office NOT A P.O. BOX																			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct DOUGLAS O. SMITH, JR., M.D., DOUGLAS O SMITH JR P.O. BOX 297		DOUGLAS O SMITH ROUTE 2 GOODING ID 83330																			
* FIRST NOTICE *	GOODING ID 83330		3. Organized Under the Laws of: ID C 45379																			
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)																						
<table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Douglas O. Smith, Jr., M.D.</td> <td>1850 Elmwood</td> <td>Gooding</td> <td>ID</td> <td>83330</td> </tr> <tr> <td>VP & Sec.</td> <td>Louise Smith</td> <td>1850 Elmwood</td> <td>Gooding</td> <td>ID</td> <td>83330</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	President	Douglas O. Smith, Jr., M.D.	1850 Elmwood	Gooding	ID	83330	VP & Sec.	Louise Smith	1850 Elmwood	Gooding	ID	83330
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5.		6. <table border="1"> <tr> <td>Signature</td> <td><i>Douglas O Smith Jr</i></td> <td>Date</td> <td>7/11/97</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>Douglas O Smith Jr</td> <td>Title</td> <td>MD P.A.</td> </tr> </table>			Signature	<i>Douglas O Smith Jr</i>	Date	7/11/97	Name (Typed or Printed)	Douglas O Smith Jr	Title	MD P.A.										
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ISSUED: 07-04-1997

DO NOT TAPE OR STAPLE

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