

Annual Report Form

Due No Later Than November 30,

1998

Return to:

SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

NO FEE REQUIRED

* FIRST NOTICE *

1. Mailing Address - Please Correct, If Not Correct

EYE CARE ASSOCIATES OF NAMPA

218-12 AVE RD

NAMPA

ID 83686

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

B J MCGOURTY

218-12 AVE RD

NAMPA

ID 83686

3. Organized Under the Laws of:

ID

C121084

4. Corporations: Enter Names and Business Addresses of **President, Secretary and Directors**
Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)

Office heldNameStreet or P.O. AddressCityStateZip

Pres. B.J. McGourty ON 218 12th Ave Rd Nampa ID 83686

5. Signature of New Registered Agent

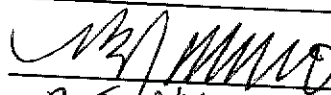
6.

Signature

Name (Typed or Printed)

Date

Title



B.J. McGourty ON

7/15/98

pres.

ISSUED: 07-03-1998

DO NOT TAPE OR STAPLE

18092