No. W 31086		Due no later than June 30, 2005 Annual Report Form 1. Mailing Address - Correct in this box, if applicable		2. Registered Agent and Office NO PO BOX CHARLES A BROWN 324 MAIN ST LEWISTON, ID 83501 3. New Registered Agent Signature	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE					
		LEWIS CLARK ENDOSCOPY PLLC CHARLES A BROWN 324 MAIN ST LEWISTON, ID 83501			
Office held	Name	Street or P.O. Address	City	<u>State</u> Zip	
			Lewi	iston, Idaho 83501	701
5. Organized Unde		6. Signature Wuchled K	Lewi	iston, Idaho 83501	
ID	OAHO / 31086	6. Signature	Lewi Jasuu enterol	iston, Idaho 83501 J Date 4/20/05	

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